

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

New York State Democratic Committee

ADDRESS (number and street) ▼

420 Lexington Avenue

Suite 845

☐ Check if different than previously reported. (ACC)

New York

NY

10170

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00143230

3. IS THIS REPORT

☐ NEW (N)

OR

☒ AMENDED (A)

## 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15 Quarterly Report (Q1)☐ July 15 Quarterly Report (Q2)☐ October 15 Quarterly Report (Q3)☐ January 31 Year-End Report (YE)☐ July 31 Mid-Year Report (Non-election Year Only) (MY)☐ Termination Report (TER)

(b) Monthly Report Due On:

☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11) (Non-Election Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12) (Non-Election Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☒ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M / D D D / Y Y Y Y Y Y

in the State of

(d) 30-Day

POST-Election Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the State of

5. Covering Period

M M M / D D D / Y Y Y Y Y Y  
09 01 2014

through

M M M / D D D / Y Y Y Y Y Y  
09 30 2014

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer John Gulino

Signature of Treasurer

John Gulino

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y  
06 01 2015

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office  
Use  
Only**FEC FORM 3X**  
Rev. 12/2004

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

New York State Democratic Committee

Report Covering the Period:

From:

 M M / D D / Y Y Y Y Y  
 09 01 2014

To:

 M M / D D / Y Y Y Y Y  
 09 30 2014

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2014		126519.36
(b) Cash on Hand at Beginning of Reporting Period.....	346777.42	
(c) Total Receipts (from Line 19) .....	1820117.79	4187646.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	2166895.21	4314165.36
7. Total Disbursements (from Line 31) .....	1640511.82	3787781.97
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	526383.39	526383.39
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	24613.55	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE** of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

New York State Democratic Committee

Report Covering the Period:

From:

M M / D D / Y Y Y Y Y  
09 01 2014

To:

M M / D D / Y Y Y Y Y  
09 30 2014
**I. Receipts**
**COLUMN A**  
**Total This Period**
**COLUMN B**  
**Calendar Year-to-Date**

## 11. Contributions (other than loans) From:

## (a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

75600.00

122330.00

(ii) Unitemized .....

95.00

5247.50

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ►

75695.00

127577.50

(b) Political Party Committees .....

0.00

0.00

(c) Other Political Committees

(such as PACs).....

273800.00

538569.63

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) ..... ►

349495.00

666147.13

## 12. Transfers From Affiliated/Other

Party Committees.....

1388237.25

2662629.87

## 13. All Loans Received .....

0.00

0.00

## 14. Loan Repayments Received.....

0.00

0.00

## 15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

5671.23

15445.50

## 16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

## 17. Other Federal Receipts

(Dividends, Interest, etc.).....

4775.00

297558.14

## 18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3).....

71939.31

545865.36

(b) Levin Funds (from Schedule H5) .....

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

71939.31

545865.36

## 19. Total Receipts (add Lines 11(d),

12, 13, 14, 15, 16, 17, and 18(c))..... ►

1820117.79

4187646.00

## 20. Total Federal Receipts

(subtract Line 18(c) from Line 19) ..... ►

1748178.48

3641780.64

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	22321.57	127945.67
(ii) Non-Federal Share.....	77266.96	577906.95
(b) Other Federal Operating Expenditures .....	63606.17	224457.29
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	163194.70	930309.91
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	5200.00	5220.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	5200.00	5220.00
29. Other Disbursements .....	0.00	222235.08
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	1472117.12	2630016.98
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	1472117.12	2630016.98
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	1640511.82	3787781.97
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	1563244.86	3209875.02

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	349495.00	666147.13
34. Total Contribution Refunds (from Line 28(d)) .....	5200.00	5220.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	344295.00	660927.13
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ..... ►	85927.74	352402.96
37. Offsets to Operating Expenditures (from Line 15, page 3).....	5671.23	15445.50
38. Net Operating Expenditures (subtract Line 37 from Line 36) ..... ►	80256.51	336957.46

: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +H9A-N5HCB

Form/Schedule: F3XA

Transaction ID :

Please be advised that the wages reported on Schedule H4 were for employees who spent 25% or less of their time during the reporting period in connection with federal elections or on Federal Election Activity and, as such, these wages can be paid as administrative expenses. Fringe benefits may continue to be reported on Schedule H4.

Form/Schedule: F3XA

Transaction ID:

With respect to the 2014 October Monthly Report, please note the following relative to Schedule A, Line 12: There were no transfers received from Dollars for Democrats during this reporting period. There are funds, however, retained in Dollars for Democrats account and these funds will be transferred to the New York State Democratic Committee sometime in 2014. This explains why the memo entries for Schedule A, Line 12 for the third quarter of 2014 (August, September and October Monthly Reports) are higher than the transfers received during this same period; the Committee discloses memo entries quarterly, not monthly, based upon contributions received by Dollars for Democrats during that quarter.

: 97 'A-G79 @G B9CI G'H9LH'F9 @G H98 'HC'5 'F9DCFHŽG7 <98I @G 'CF' +H9A-N5HCB

Form/Schedule: F3XA

Transaction ID :

With respect to the 2014 October Monthly Report, please note the following relative to Schedule A, Line 12: There were no transfers received from the Democratic National Committee during this reporting period. There are funds, however, retained in the Democratic National Committee account and these funds will be transferred to the New York State Democratic Committee sometime in 2014. This explains why the memo entries for Schedule A, Line 12 for the third quarter of 2014 (August, September and October Monthly Reports) are higher than the transfers received during this same period; the Committee discloses memo entries quarterly, not monthly, based upon contributions received by the Democratic National Committee during that quarter.

Form/Schedule: F3XA

Transaction ID:

October Monthly Report (09/01/2014 - 09/30/2014), ID #C00143230. This is in response to questions raised by the Federal Election Commission's notification dated 04/27/15 regarding information contained in the above referenced report: 1) Relative to Schedule A, Line 12, please note that no portion of the transfers-in from Democratic Congressional Campaign Committee and Democratic National Committee were earmarked for any exempt activity. 2) Relative to Schedule B, Line 30(b), the payment for 'Wages & Gas Stipend' and/or 'Wages, Gas Stipend & Health Insurance' was not a cash payment but was a per diem payment made in accordance with the normal per diem policy and does not require any memo entry. 3) Please note that the payment for 'GOTV Training Food' is amended to disclose this on Schedule B supporting Line 30(b).

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

## **A. David Burke**

Mailing Address 2755 Sand Hill Rd

City State Zip Code  
Menlo Park CA 94025

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Makena Capital

Occupation

Principal

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 24 / 2014

**Transaction ID : C5895048**

Amount of Each Receipt this Period

10000.00

Full Name (Last, First, Middle Initial)

## **B. Kimberly Conner**

Mailing Address P.O. Box 60

City State Zip Code  
Cold Spring NY 10516-0060

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self Employed

Occupation

Web Designer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 24 / 2014

**Transaction ID : C5895049**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

## **C. Robert G. Conway Jr.**

Mailing Address 27 Manor Drive

City State Zip Code  
Glenmont NY 12077-3326

FEC ID number of contributing  
federal political committee.

C

Name of Employer

State of New York

Occupation

Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 10 / 2014

**Transaction ID : C5889660**

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

10750.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

## **A. Roger George**

Mailing Address 2560 Orchard Parkway

City State Zip Code  
San Jose CA 95131

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Align Technology

Occupation

Lawyer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 17 / 2014

**Transaction ID : C5891237**

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

## **B. GEOFFREY GLOAK**

Mailing Address 101 Wildflower Rd

City State Zip Code  
Valatie NY 12184

FEC ID number of contributing  
federal political committee.

C

Name of Employer

New York State Department of Taxation

Occupation

Public Information Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 10 / 2014

**Transaction ID : C5889662**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

## **C. Larry Roth**

Mailing Address 14 Foxwood Rd

City State Zip Code  
Kings Point NY 11024-1202

FEC ID number of contributing  
federal political committee.

C

Name of Employer

N/A

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 30 / 2014

**Transaction ID : C5896933**

Amount of Each Receipt this Period

2600.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

7850.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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FOR LINE NUMBER: PAGE 10 OF 224

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A. Laura B Sillerman**

Mailing Address 157 E 70th St

City  
New York

State Zip Code  
NY 10021-5109

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
The Tomorrow Foundation

Occupation  
Philanthropist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 17 / 2014

Transaction ID : C5889666

Amount of Each Receipt this Period

10000.00

Full Name (Last, First, Middle Initial)

**B. Robert Sillerman**

Mailing Address 157 E 70th St

City  
New York

State Zip Code  
NY 10021-5109

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
The Sillerman Companies

Occupation  
President & CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 17 / 2014

Transaction ID : C5889665

Amount of Each Receipt this Period

10000.00

Full Name (Last, First, Middle Initial)

**C. Joseph J Sitt**

Mailing Address 449 Avenue T

City  
Brooklyn

State Zip Code  
NY 11227

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Thor Equities LLC

Occupation  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 24 / 2014

Transaction ID : C5892235

Amount of Each Receipt this Period

2000.00

SUBTOTAL of Receipts This Page (optional)..... ►

22000.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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FOR LINE NUMBER:  
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NAME OF COMMITTEE (In Full)

**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. Jon Stryker**

Mailing Address 211 South Rose Street

City State Zip Code  
 Kalamazoo MI 49007

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Self Employed

Architect

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 09 / 26 / 2014

**Transaction ID : C5895416**

Amount of Each Receipt this Period

10000.00

Full Name (Last, First, Middle Initial)

**B. Henry Van Ameringen**

Mailing Address 37 W 12th St  
 Apt 11e

City State Zip Code  
 New York NY 10011-8559

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

N/A

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : C5896932**

Amount of Each Receipt this Period

10000.00

Full Name (Last, First, Middle Initial)

**c. ASG Equities LLC**

Mailing Address 22 Cortlandt St

City State Zip Code  
 New York NY 10007

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 09 / 25 / 2014

**Transaction ID : C5895122**

Amount of Each Receipt this Period

7500.00

LLC - Members below if itemized. Permissible funds.

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

27500.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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FOR LINE NUMBER:  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. Eddie Gindi**

Mailing Address 601 Avenue J

City

Brooklyn

State

NY

Zip Code

11230

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Century 21 Department Stores LLC

Occupation

Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3750.00

Date of Receipt

09 / 25 / 2014

Transaction ID : C5895204

Amount of Each Receipt this Period

1875.00

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. Isaac A. Gindi**

Mailing Address 22 Cortlandt St

City

New York

State

NY

Zip Code

10007

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Century 21 Department Stores LLC

Occupation

Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3750.00

Date of Receipt

09 / 25 / 2014

Transaction ID : C5895169

Amount of Each Receipt this Period

1875.00

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**C. Isaac S. Gindi**

Mailing Address 380 Rector Pl, Apt 25J

City

New York

State

NY

Zip Code

10280

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Century 21 Department Stores LLC

Occupation

Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3750.00

Date of Receipt

09 / 25 / 2014

Transaction ID : C5895206

Amount of Each Receipt this Period

1875.00

[MEMO ITEM]

\*

**SUBTOTAL** of Receipts This Page (optional)..... ►

0.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER: PAGE 13 OF 224

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A. Raymond Gindi**

Mailing Address 725 Ave R

City State Zip Code  
 Brooklyn NY 11223

FEC ID number of contributing federal political committee.

C

Name of Employer  
 Century 21 Department Stores LLC

Occupation  
 Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3750.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 09 25 2014

Transaction ID : C5895167

Amount of Each Receipt this Period

1875.00

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. Century 21 Department Stores LLC**

Mailing Address 22 Cortlandt St

City State Zip Code  
 New York NY 10007

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 09 25 2014

Transaction ID : C5895208

Amount of Each Receipt this Period

7500.00

LLC - Members below if itemized. Permissible funds.

Full Name (Last, First, Middle Initial)

**C. Eddie Gindi**

Mailing Address 601 Avenue J

City State Zip Code  
 Brooklyn NY 11230

FEC ID number of contributing federal political committee.

C

Name of Employer  
 Century 21 Department Stores LLC

Occupation  
 Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3750.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 09 25 2014

Transaction ID : C5895217

Amount of Each Receipt this Period

1875.00

[MEMO ITEM]

\*

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

7500.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

## **A. Isaac A. Gindi**

Mailing Address 22 Cortlandt St

City  
New York

State Zip Code  
NY 10007

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Century 21 Department Stores LLC

Occupation  
Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3750.00

Date of Receipt

09 / 25 / 2014

Transaction ID : C5895222

Amount of Each Receipt this Period

1875.00

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

## **B. Isaac S. Gindi**

Mailing Address 380 Rector Pl, Apt 25J

City  
New York

State Zip Code  
NY 10280

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Century 21 Department Stores LLC

Occupation  
Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3750.00

Date of Receipt

09 / 25 / 2014

Transaction ID : C5895224

Amount of Each Receipt this Period

1875.00

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

## **C. Raymond Gindi**

Mailing Address 725 Ave R

City  
Brooklyn

State Zip Code  
NY 11223

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Century 21 Department Stores LLC

Occupation  
Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3750.00

Date of Receipt

09 / 25 / 2014

Transaction ID : C5895402

Amount of Each Receipt this Period

1875.00

[MEMO ITEM]

\*

**SUBTOTAL** of Receipts This Page (optional)..... ►

0.00

**TOTAL** This Period (last page this line number only)..... ►

75600.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 OF 224

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

## **A. BISHOP PAC BUILDING INFRASTRUCTURE HARNESSING OUR PRIORITIES**

Mailing Address PO BOX 1087

City State Zip Code  
 SOUTHAMPTON NY 11969

FEC ID number of contributing  
federal political committee.

**C** C00505636

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

**09** / **24** / **2014**

**Transaction ID : C5891251**

Amount of Each Receipt this Period

10000.00

non multi-candidate committee

Full Name (Last, First, Middle Initial)

## **B. BROTHERHOOD OF LOCOMOTIVE ENGINEERS AND TRAINMEN P**

Mailing Address 1370 Ontario St

City State Zip Code  
 Cleveland OH 44113

FEC ID number of contributing  
federal political committee.

**C** C00099234

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

**09** / **24** / **2014**

**Transaction ID : C5891252**

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

## **C. Committee to Elect Martha Robertson**

Mailing Address PO BOX 54

City State Zip Code  
 DRYDEN NY 13053

FEC ID number of contributing  
federal political committee.

**C** C00543785

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

156323.69

Date of Receipt

**09** / **04** / **2014**

**Transaction ID : C5921644**

Amount of Each Receipt this Period

29500.00

Transfer

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

44500.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 OF 224

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

## **A. Committee to Elect Martha Robertson**

Mailing Address PO BOX 54

City State Zip Code  
 DRYDEN NY 13053

FEC ID number of contributing  
federal political committee.

**C** C00543785

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

156323.69

Date of Receipt

**09 / 12 / 2014**

**Transaction ID : C5921650**

Amount of Each Receipt this Period

27800.00

Transfer

Full Name (Last, First, Middle Initial)

## **B. Committee to Elect Martha Robertson**

Mailing Address PO BOX 54

City State Zip Code  
 DRYDEN NY 13053

FEC ID number of contributing  
federal political committee.

**C** C00543785

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

156323.69

Date of Receipt

**09 / 17 / 2014**

**Transaction ID : C5921664**

Amount of Each Receipt this Period

15500.00

Transfer

Full Name (Last, First, Middle Initial)

## **C. Committee to Elect Martha Robertson**

Mailing Address PO BOX 54

City State Zip Code  
 DRYDEN NY 13053

FEC ID number of contributing  
federal political committee.

**C** C00543785

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

156323.69

Date of Receipt

**09 / 23 / 2014**

**Transaction ID : C5921678**

Amount of Each Receipt this Period

27500.00

Transfer

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

70800.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A. Committee to Elect Martha Robertson**

Mailing Address PO BOX 54

City	State	Zip Code
DRYDEN	NY	13053

FEC ID number of contributing federal political committee.

C C00543785

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

156323.69

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	5		2	0	1	4

Transaction ID : C5921684

Amount of Each Receipt this Period

15500.00

Transfer

Full Name (Last, First, Middle Initial)

**B. CWA-COPE PCC**

Mailing Address 501 Third Street, NW

City	State	Zip Code
Washington	DC	20001

FEC ID number of contributing federal political committee.

C C00002089

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	5		2	0	1	4

Transaction ID : C5895058

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

**C. FRIENDS OF CAROLYN MCCARTHY**

Mailing Address P.O. Box 190

City	State	Zip Code
Mineola	NY	11501

FEC ID number of contributing federal political committee.

C C00318931

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	3		2	0	1	4

Transaction ID : C5889651

Amount of Each Receipt this Period

5000.00

SUBTOTAL of Receipts This Page (optional)..... ►

25500.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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☐ 11a ☐ 11b ☒ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

## **A. HUDSON VALLEY PAC**

Mailing Address PO BOX 270

City State Zip Code  
NEWBURGH NY 12550

FEC ID number of contributing  
federal political committee.

**C** C00549014

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

**09** / **24** / **2014**

**Transaction ID : C5894029**

Amount of Each Receipt this Period

3750.00

Full Name (Last, First, Middle Initial)

## **B. HUDSON VALLEY PAC**

Mailing Address PO BOX 270

City State Zip Code  
NEWBURGH NY 12550

FEC ID number of contributing  
federal political committee.

**C** C00549014

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

**09** / **24** / **2014**

**Transaction ID : C5894030**

Amount of Each Receipt this Period

1250.00

Full Name (Last, First, Middle Initial)

## **C. SEAN ELDRIDGE FOR CONGRESS**

Mailing Address PO BOX 4113

City State Zip Code  
KINGSTON NY 12402

FEC ID number of contributing  
federal political committee.

**C** C00541227

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

344500.09

Date of Receipt

**09** / **16** / **2014**

**Transaction ID : C5921661**

Amount of Each Receipt this Period

93000.00

Transfer

**SUBTOTAL** of Receipts This Page (optional)..... ►

98000.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

## **A. SEAN ELDRIDGE FOR CONGRESS**

Mailing Address PO BOX 4113

City State Zip Code  
 KINGSTON NY 12402

FEC ID number of contributing  
federal political committee.

**C** C00541227

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

344500.09

Date of Receipt

**09 / 23 / 2014**

**Transaction ID : C5921674**

Amount of Each Receipt this Period

30000.00

Transfer

Full Name (Last, First, Middle Initial)

## **B. UNITED TRANSPORTATION UNION POLITICAL ACTION COMMI**

Mailing Address 24950 Country Club Blvd, Ste 340

City State Zip Code  
 North Olmsted OH 44070

FEC ID number of contributing  
federal political committee.

**C** C00001636

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

**09 / 25 / 2014**

**Transaction ID : C5895061**

Amount of Each Receipt this Period

5000.00

## **C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

**/ /**

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional)..... ►

35000.00

**TOTAL** This Period (last page this line number only)..... ►

273800.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 20 OF 224

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
------------------------------	------------------------------	------------------------------	--	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

A. John Balint

Mailing Address 40 Autumn Drive, Apt 234

City	State	Zip Code
Slingerlands	NY	12159

FEC ID number of contributing federal political committee.

C

Name of Employer

Albany Medical Center

Occupation

Physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1217.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2014

Transaction ID : C5922784

Amount of Each Receipt this Period

150.00

[MEMO ITEM]

\* Dollars for Democrats

Full Name (Last, First, Middle Initial)

B. John Balint

Mailing Address 40 Autumn Drive, Apt 234

City	State	Zip Code
Slingerlands	NY	12159

FEC ID number of contributing federal political committee.

C

Name of Employer

Albany Medical Center

Occupation

Physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1217.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2014

Transaction ID : C5923137

Amount of Each Receipt this Period

237.50

[MEMO ITEM]

\* NY Party Victory Fund

Full Name (Last, First, Middle Initial)

C. John Balint

Mailing Address 40 Autumn Drive, Apt 234

City	State	Zip Code
Slingerlands	NY	12159

FEC ID number of contributing federal political committee.

C

Name of Employer

Albany Medical Center

Occupation

Physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1217.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	03	/	2014

Transaction ID : C5923144

Amount of Each Receipt this Period

142.50

[MEMO ITEM]

\* NY Party Victory Fund

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

## **A. Priscilla Browning**

Mailing Address 1 Pleasant Grove Ln

City State Zip Code  
 Ithaca NY 14850

FEC ID number of contributing  
federal political committee.

C

Name of Employer

N/A

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

337.50

Date of Receipt

08 / 07 / 2014

Transaction ID : C5922787

Amount of Each Receipt this Period

100.00

**[MEMO ITEM]**

\* Dollars for Democrats

Full Name (Last, First, Middle Initial)

## **B. Virginia L Caldwell-Rosario**

Mailing Address 3 Stuyvesant Oval

City State Zip Code  
 New York NY 10009-2122

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

190.00

Date of Receipt

08 / 15 / 2014

Transaction ID : C5923156

Amount of Each Receipt this Period

190.00

**[MEMO ITEM]**

\* NY Party Victory Fund

Full Name (Last, First, Middle Initial)

## **c. Chris S. Calender**

Mailing Address 19646 Woodside Dr

City State Zip Code  
 Watertown NY 13601

FEC ID number of contributing  
federal political committee.

C

Name of Employer

N/A

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

08 / 27 / 2014

Transaction ID : C5923163

Amount of Each Receipt this Period

380.00

**[MEMO ITEM]**

\* NY Party Victory Fund

**SUBTOTAL** of Receipts This Page (optional)..... ►

0.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

## **A. Rosemary T Caruso**

Mailing Address 11 Mallard Lane

City State Zip Code  
Islip NY 11751

FEC ID number of contributing  
federal political committee.

C

Name of Employer

N/A

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

190.00

Date of Receipt

08 / 15 / 2014

**Transaction ID : C5923170**

Amount of Each Receipt this Period

190.00

**[MEMO ITEM]**

\* NY Party Victory Fund

Full Name (Last, First, Middle Initial)

## **B. DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE**

Mailing Address 430 South Capitol Street SE  
2nd Floor

City State Zip Code  
Washington DC 20003

FEC ID number of contributing  
federal political committee.

C C00000935

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2123505.93

Date of Receipt

09 / 04 / 2014

**Transaction ID : C5921646**

Amount of Each Receipt this Period

386143.00

Full Name (Last, First, Middle Initial)

## **C. DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE**

Mailing Address 430 South Capitol Street SE  
2nd Floor

City State Zip Code  
Washington DC 20003

FEC ID number of contributing  
federal political committee.

C C00000935

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2123505.93

Date of Receipt

09 / 18 / 2014

**Transaction ID : C5921665**

Amount of Each Receipt this Period

627335.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

1013478.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

## **A. DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE**

Mailing Address 430 South Capitol Street SE  
2nd Floor

City State Zip Code  
Washington DC 20003

FEC ID number of contributing  
federal political committee.

**C** C00000935

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2123505.93

Date of Receipt

**09** / **22** / **2014**

**Transaction ID : C5922238**

Amount of Each Receipt this Period

886.28

In-Kind: Lodging

Full Name (Last, First, Middle Initial)

## **B. Democratic National Committee**

Mailing Address 430 South Capitol Street, SE

City State Zip Code  
Washington DC 20003

FEC ID number of contributing  
federal political committee.

**C** C00010603

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

214189.41

Date of Receipt

**09** / **17** / **2014**

**Transaction ID : C5889667**

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

## **C. Democratic National Committee**

Mailing Address 430 South Capitol Street, SE

City State Zip Code  
Washington DC 20003

FEC ID number of contributing  
federal political committee.

**C** C00010603

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

214189.41

Date of Receipt

**09** / **30** / **2014**

**Transaction ID : C5922247**

Amount of Each Receipt this Period

3220.00

In-Kind: On-Line Voter File Access

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

9106.28

: 97 `A=G79 @G B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A=N5HCB  
.

Form/Schedule: SA12  
Transaction ID : C5889667

The \$5,000.00 transfer on Schedule A, Line 12 from the Democratic National Committee reflects a party transfer.

Form/Schedule:  
Transaction ID:

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A. Democratic National Committee**

Mailing Address 430 South Capitol Street, SE

City	State	Zip Code
Washington	DC	20003

FEC ID number of contributing federal political committee.

C C00010603

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

214189.41

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	30	/	2014

Transaction ID : C5923554

Amount of Each Receipt this Period

21424.86

**[MEMO ITEM]**

\* NY Party Victory Fund Unitemized

Full Name (Last, First, Middle Initial)

**B. Dollars For Democrats**

Mailing Address 430 South Capitol Street, SE

City	State	Zip Code
Washington	DC	20003

FEC ID number of contributing federal political committee.

C C00073791

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

69824.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	30	/	2014

Transaction ID : C5923091

Amount of Each Receipt this Period

8723.00

**[MEMO ITEM]**

\* Dollars for Democrats Unitemized

Full Name (Last, First, Middle Initial)

**C. Roger H. Farrell**

Mailing Address 308 Bella Vista Dr

City	State	Zip Code
Ithaca	NY	14850-5774

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

N/A

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

213.75

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	15	/	2014

Transaction ID : C5923174

Amount of Each Receipt this Period

213.75

**[MEMO ITEM]**

\* NY Party Victory Fund

SUBTOTAL of Receipts This Page (optional)..... ►

0.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 26 OF 224

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A. DeNora Getachew**

Mailing Address 272 W. 107th Street, #12A

City	State	Zip Code
New York	NY	10025

FEC ID number of contributing federal political committee.

C

Name of Employer

Unemployed

Occupation

Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	13	/	2014

Transaction ID : C5923086

Amount of Each Receipt this Period

250.00

**[MEMO ITEM]**

\* Dollars for Democrats

Full Name (Last, First, Middle Initial)

**B. Sandra L Glantz**

Mailing Address 6 Southern Woods

City	State	Zip Code
Pittsford	NY	14534-3604

FEC ID number of contributing federal political committee.

C

Name of Employer

URMC

Occupation

MD

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

95.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	15	/	2014

Transaction ID : C5923186

Amount of Each Receipt this Period

95.00

**[MEMO ITEM]**

\* NY Party Victory Fund

Full Name (Last, First, Middle Initial)

**C. Clorinda Gorman**

Mailing Address PO Box 1136

City	State	Zip Code
East Hampton	NY	11937-0792

FEC ID number of contributing federal political committee.

C

Name of Employer

Self Employed

Occupation

Writer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

190.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	15	/	2014

Transaction ID : C5923192

Amount of Each Receipt this Period

190.00

**[MEMO ITEM]**

\* NY Party Victory Fund

SUBTOTAL of Receipts This Page (optional)..... ►

0.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A. Rosalind Groskin**

Mailing Address 154 Crescent Lane

City	State	Zip Code
Roslyn Heights	NY	11577-1552

FEC ID number of contributing federal political committee.

C

Name of Employer

N/A

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1900.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	15	/	2014

Transaction ID : C5923204

Amount of Each Receipt this Period

1900.00

[MEMO ITEM]

\* NY Party Victory Fund

Full Name (Last, First, Middle Initial)

**B. Delphine Gross**

Mailing Address 1104 E 214th St

City	State	Zip Code
Bronx	NY	10469-2412

FEC ID number of contributing federal political committee.

C

Name of Employer

N/A

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

190.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	15	/	2014

Transaction ID : C5923208

Amount of Each Receipt this Period

190.00

[MEMO ITEM]

\* NY Party Victory Fund

Full Name (Last, First, Middle Initial)

**C. Judith Johnson**

Mailing Address 48 Fessler Dr

City	State	Zip Code
Spring Valley	NY	10977-2004

FEC ID number of contributing federal political committee.

C

Name of Employer

Peekskill City School District

Occupation

School Superintendent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

237.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	27	/	2014

Transaction ID : C5923373

Amount of Each Receipt this Period

237.50

[MEMO ITEM]

\* NY Party Victory Fund

SUBTOTAL of Receipts This Page (optional)..... ►

0.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A. Robert J Kennedy**

Mailing Address 1855 Corporal Kennedy St  
Apt 1B

City	State	Zip Code
Bayside	NY	11360-1432

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Information Requested

Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	15	/	2014

Transaction ID : C5923378

Amount of Each Receipt this Period

285.00

[MEMO ITEM]

\* NY Party Victory Fund

Full Name (Last, First, Middle Initial)

**B. Jane Merrill**

Mailing Address 770 James St Apt 1018

City	State	Zip Code
Syracuse	NY	13203

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

N/A

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	16	/	2014

Transaction ID : C5923381

Amount of Each Receipt this Period

475.00

[MEMO ITEM]

\* NY Party Victory Fund

Full Name (Last, First, Middle Initial)

**c. NYSDC Campaign Account**

Mailing Address 424 Madison Avenue

City	State	Zip Code
New York	NY	10008

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	26	/	2014

Transaction ID : C5922741

Amount of Each Receipt this Period

9599.70

Redesignation of 9/15/14 cntrb that was originally  
deposited into non-federal account

SUBTOTAL of Receipts This Page (optional).....▶

9599.70

TOTAL This Period (last page this line number only).....▶

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

## **A. NYSDC Campaign Account**

Mailing Address 424 Madison Avenue

City  
New York

State Zip Code  
NY 10008

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

09 / 29 / 2014

**Transaction ID : C5922742**

Amount of Each Receipt this Period

400.30

Redesignation of 9/15/14 cntrb that was originally  
deposited into non-federal account

Full Name (Last, First, Middle Initial)

## **B. Elizabeth Parrish**

Mailing Address 2 Beekman Pl

City  
New York

State Zip Code  
NY 10022-8058

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Stella Adler Studio

Occupation  
Teacher

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

190.00

Date of Receipt

07 / 16 / 2014

**Transaction ID : C5923461**

Amount of Each Receipt this Period

190.00

**[MEMO ITEM]**  
 \* NY Party Victory Fund

Full Name (Last, First, Middle Initial)

## **C. Krishnadat Ramdowe**

Mailing Address 4730 Robinson St

City  
Flushing

State Zip Code  
NY 11355

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

190.00

Date of Receipt

09 / 04 / 2014

**Transaction ID : C5923465**

Amount of Each Receipt this Period

190.00

**[MEMO ITEM]**  
 \* NY Party Victory Fund

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

400.30

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. Michael H. Reinhardt**

Mailing Address 11 Forest Dr.

City State Zip Code  
Huntington NY 11743

FEC ID number of contributing  
federal political committee.

C

Name of Employer

N/A

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

950.00

Date of Receipt

09 / 10 / 2014

**Transaction ID : C5923474**

Amount of Each Receipt this Period

950.00

**[MEMO ITEM]**

\* NY Party Victory Fund

Full Name (Last, First, Middle Initial)

**B. STEPHEN SHANE**

Mailing Address 3 WESTHAVEN LN

City State Zip Code  
WHITE PLAINS NY 10605

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self Employed

Occupation

ATTORNEY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

427.50

Date of Receipt

07 / 31 / 2014

**Transaction ID : C5923480**

Amount of Each Receipt this Period

237.50

**[MEMO ITEM]**

\* NY Party Victory Fund

Full Name (Last, First, Middle Initial)

**C. STEFANIE Sheehan**

Mailing Address 38 E 85th St. Apt. 9-D

City State Zip Code  
NEW YORK NY 10028-0905

FEC ID number of contributing  
federal political committee.

C

Name of Employer

N/A

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

09 / 13 / 2014

**Transaction ID : C5923087**

Amount of Each Receipt this Period

200.00

**[MEMO ITEM]**

\* Dollars for Democrats

**SUBTOTAL** of Receipts This Page (optional)..... ►

0.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

## **A. Philip Shepherd**

Mailing Address 1 Cindy Ln

City

Wappingers Falls

State

NY

Zip Code

12590-1703

FEC ID number of contributing  
federal political committee.

C

Name of Employer

N/A

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

190.00

Date of Receipt

08 / 15 / 2014

**Transaction ID : C5923544**

Amount of Each Receipt this Period

190.00

**[MEMO ITEM]**

\* NY Party Victory Fund

Full Name (Last, First, Middle Initial)

## **B. Helena Sokoloff**

Mailing Address 215 Fox Meadow Rd

City

Scarsdale

State

NY

Zip Code

10583-1643

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self Employed

Occupation

Photographer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

190.00

Date of Receipt

08 / 15 / 2014

**Transaction ID : C5923547**

Amount of Each Receipt this Period

190.00

**[MEMO ITEM]**

\* NY Party Victory Fund

Full Name (Last, First, Middle Initial)

## **C. Jayne Spence**

Mailing Address 244 Lake Shore Dr S

City

Maryland

State

NY

Zip Code

12116

FEC ID number of contributing  
federal political committee.

C

Name of Employer

N/A

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

09 / 13 / 2014

**Transaction ID : C5923088**

Amount of Each Receipt this Period

500.00

**[MEMO ITEM]**

\* Dollars for Democrats

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 32 OF 224

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

A. JUDY E TENNEY

Mailing Address 845 FOREST AVE

City	State	Zip Code
RYE	NY	10580

FEC ID number of contributing federal political committee.

C

Name of Employer

N/A

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

237.50

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			1	6			2	0	1	4		

Transaction ID : C5923548

Amount of Each Receipt this Period

237.50

[MEMO ITEM]

\* NY Party Victory Fund

Full Name (Last, First, Middle Initial)

B. Mary S Thomasset

Mailing Address 100 Ardsley Ave W  
Apt 1A

City	State	Zip Code
Ardsley on Hudson	NY	10503-0081

FEC ID number of contributing federal political committee.

C

Name of Employer

N/A

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			1	5			2	0	1	4		

Transaction ID : C5923549

Amount of Each Receipt this Period

475.00

[MEMO ITEM]

\* NY Party Victory Fund

Full Name (Last, First, Middle Initial)

C. Francois Vuilleumier

Mailing Address 21 Piermont Pl

City	State	Zip Code
Piermont	NY	10968-1105

FEC ID number of contributing federal political committee.

C

Name of Employer

N/A

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

190.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			1	5			2	0	1	4		

Transaction ID : C5923550

Amount of Each Receipt this Period

190.00

[MEMO ITEM]

\* NY Party Victory Fund

SUBTOTAL of Receipts This Page (optional)..... ►

0.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A. William Weisner**

Mailing Address 74 Spencer Dr

City	State	Zip Code
New Rochelle	NY	10801

FEC ID number of contributing federal political committee.

C

Name of Employer  
Tarter Kinsky and Dr

Occupation  
Lawyer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

190.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	04	/	2014

Transaction ID : C5923551

Amount of Each Receipt this Period

190.00

[MEMO ITEM]

\* NY Party Victory Fund

Full Name (Last, First, Middle Initial)

**B. Lucille Werlinich**

Mailing Address 18 Ponds Lane

City	State	Zip Code
Purchase	NY	10577

FEC ID number of contributing federal political committee.

C

Name of Employer  
N/A

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	11	/	2014

Transaction ID : C5923089

Amount of Each Receipt this Period

200.00

[MEMO ITEM]

\* Dollars for Democrats

Full Name (Last, First, Middle Initial)

**C. Eleanor M Williams**

Mailing Address 2746 Henneberry Rd

City	State	Zip Code
Pompey	NY	13138

FEC ID number of contributing federal political committee.

C

Name of Employer  
N/A

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

190.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	04	/	2014

Transaction ID : C5923552

Amount of Each Receipt this Period

190.00

[MEMO ITEM]

\* NY Party Victory Fund

SUBTOTAL of Receipts This Page (optional)..... ►

0.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

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☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. Arthur T. Wong**

Mailing Address 91 Walnut St

City

Binghamton

State

NY

Zip Code

13905-2906

FEC ID number of contributing  
federal political committee.

C

Name of Employer

N/A

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

08 / 15 / 2014

**Transaction ID : C5923553**

Amount of Each Receipt this Period

285.00

**[MEMO ITEM]**

\* NY Party Victory Fund

Full Name (Last, First, Middle Initial)

**B. KATHLEEN RICE VICTORY FUND**

Mailing Address 1050 17TH ST NW STE 590

City

WASHINGTON

State

DC

Zip Code

20036

FEC ID number of contributing  
federal political committee.

C C00567594

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

301400.00

Date of Receipt

09 / 16 / 2014

**Transaction ID : C5921656**

Amount of Each Receipt this Period

188000.00

Full Name (Last, First, Middle Initial)

**C. Marion Bergman**

Mailing Address 104A Middleville Rd, Apt 87A

City

Northport

State

NY

Zip Code

11768-2346

FEC ID number of contributing  
federal political committee.

C

Name of Employer

N/A

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

09 / 09 / 2014

**Transaction ID : C5922347**

Amount of Each Receipt this Period

10000.00

**[MEMO ITEM]**

\* Kathleen Rice Victory Fund

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

188000.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 35 OF 224

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. Gene M. Bernstein**

Mailing Address 25 Melville Park Rd, Fl 2

City State Zip Code  
 Melville NY 11747-3175

FEC ID number of contributing  
federal political committee.

C

Name of Employer Occupation  
 Northville Industries Chairman/Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

09 / 11 / 2014

Transaction ID : C5922361

Amount of Each Receipt this Period

2500.00

**[MEMO ITEM]**

\* Kathleen Rice Victory Fund

Full Name (Last, First, Middle Initial)

**B. Carla Concannon**

Mailing Address 140 Whitehall Blvd

City State Zip Code  
 Garden City NY 11530-1435

FEC ID number of contributing  
federal political committee.

C

Name of Employer Occupation  
 N/A Homemaker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

09 / 16 / 2014

Transaction ID : C5922368

Amount of Each Receipt this Period

5000.00

**[MEMO ITEM]**

\* Kathleen Rice Victory Fund

Full Name (Last, First, Middle Initial)

**C. Chris Concannon**

Mailing Address 645 Madison Ave, Fl 16

City State Zip Code  
 New York NY 10022-1010

FEC ID number of contributing  
federal political committee.

C

Name of Employer Occupation  
 Virtu Financial, LLC Partner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

09 / 16 / 2014

Transaction ID : C5922367

Amount of Each Receipt this Period

10000.00

**[MEMO ITEM]**

\* Kathleen Rice Victory Fund

**SUBTOTAL** of Receipts This Page (optional)..... ►

0.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 36 OF 224

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A. Milton Cooper**

Mailing Address 3333 New Hyde Park Road, Suite 100

City	State	Zip Code
New Hyde Park	NY	11042

FEC ID number of contributing federal political committee.

C

Name of Employer

Kimco Realty Corporation

Occupation

Chairman &amp; CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	02	/	2014

Transaction ID : C5922336

Amount of Each Receipt this Period

2400.00

[MEMO ITEM]

\* Kathleen Rice Victory Fund

Full Name (Last, First, Middle Initial)

**B. Leonard Feinstein**

Mailing Address 1 Dupont Ct

City	State	Zip Code
Greenvale	NY	11548-1401

FEC ID number of contributing federal political committee.

C

Name of Employer

N/A

Occupation

Homemaker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	08	/	2014

Transaction ID : C5922339

Amount of Each Receipt this Period

10000.00

[MEMO ITEM]

\* Kathleen Rice Victory Fund

Full Name (Last, First, Middle Initial)

**C. Susan Feinstein**

Mailing Address 1 Dupont Ct

City	State	Zip Code
Greenvale	NY	11548-1401

FEC ID number of contributing federal political committee.

C

Name of Employer

Bed Bath &amp; Beyond

Occupation

Co-Chairman

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	08	/	2014

Transaction ID : C5922340

Amount of Each Receipt this Period

10000.00

[MEMO ITEM]

\* Kathleen Rice Victory Fund

SUBTOTAL of Receipts This Page (optional)..... ►

0.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 37 OF 224

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
------------------------------	------------------------------	------------------------------	--	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A. Joseph Feshbach**

Mailing Address 21 Barkers Point Rd

City

Sands Point

State

NY

Zip Code

11050-1107

FEC ID number of contributing  
federal political committee.

C

Name of Employer

N/A

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	1		2	0	1	4		

Transaction ID : C5922360

Amount of Each Receipt this Period

10000.00

[MEMO ITEM]

\* Kathleen Rice Victory Fund

Full Name (Last, First, Middle Initial)

**B. Michael Kerr**

Mailing Address PO Box 337

City

Long Beach

State

NY

Zip Code

11561-0337

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Fire Command Co.

Occupation

President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	2		2	0	1	4		

Transaction ID : C5922332

Amount of Each Receipt this Period

10000.00

[MEMO ITEM]

\* Kathleen Rice Victory Fund

Full Name (Last, First, Middle Initial)

**C. Thomas Lane**

Mailing Address 443 W 24th St

City

New York

State

NY

Zip Code

10011-1251

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Winston Strawn

Occupation

Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	1		2	0	1	4		

Transaction ID : C5922362

Amount of Each Receipt this Period

10000.00

[MEMO ITEM]

\* Kathleen Rice Victory Fund

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. Howard M. Lorber**

Mailing Address 712 5th Ave

City

New York

State

NY

Zip Code

10019-4127

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Vector Group, Ltd.

Occupation

Real Estate Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

09 / 16 / 2014

Transaction ID : C5922370

Amount of Each Receipt this Period

10000.00

[MEMO ITEM]

\* Kathleen Rice Victory Fund

Full Name (Last, First, Middle Initial)

**B. Lisa J. Lourie**

Mailing Address 23 Brewster Ln E

City

Setauket

State

NY

Zip Code

11733-3225

FEC ID number of contributing  
federal political committee.

C

Name of Employer

N/A

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

09 / 09 / 2014

Transaction ID : C5922350

Amount of Each Receipt this Period

10000.00

[MEMO ITEM]

\* Kathleen Rice Victory Fund

Full Name (Last, First, Middle Initial)

**C. David S. Mack**

Mailing Address 2115 Linwood Avenue, Ste 110

City

Fort Lee

State

NJ

Zip Code

07024

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Mack Companies

Occupation

Principal

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

09 / 02 / 2014

Transaction ID : C5922333

Amount of Each Receipt this Period

2000.00

[MEMO ITEM]

\* Kathleen Rice Victory Fund

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

## **A. Lisa Mullarkey**

Mailing Address 88 Weir Ln

City

Locust Valley

State

NY

Zip Code

11560-1626

FEC ID number of contributing  
federal political committee.

C

Name of Employer

N/A

Occupation

Homemaker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2400.00

Date of Receipt

09 / 09 / 2014

Transaction ID : C5922352

Amount of Each Receipt this Period

2400.00

**[MEMO ITEM]**

\* Kathleen Rice Victory Fund

Full Name (Last, First, Middle Initial)

## **B. Sheila Natbony**

Mailing Address 6 Saddle Ridge Rd

City

Old Westbury

State

NY

Zip Code

11568-1150

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Queens Long Island Medical Group

Occupation

Physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1700.00

Date of Receipt

09 / 15 / 2014

Transaction ID : C5922365

Amount of Each Receipt this Period

1200.00

**[MEMO ITEM]**

\* Kathleen Rice Victory Fund

Full Name (Last, First, Middle Initial)

## **C. A. Robert Pietrzak**

Mailing Address 301 W. 57th Street, Apt. 31A

City

New York

State

NY

Zip Code

10019

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Sidley Austin LLP

Occupation

Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

09 / 08 / 2014

Transaction ID : C5922346

Amount of Each Receipt this Period

5000.00

**[MEMO ITEM]**

\* Kathleen Rice Victory Fund

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 40 OF 224

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A. Philip Pilevsky**

Mailing Address 295 Madison Ave

City

New York

State

NY

Zip Code

10017-6303

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Philips International

Occupation

Chairman &amp; CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	2		2	0	1	4		

Transaction ID : C5922334

Amount of Each Receipt this Period

10000.00

[MEMO ITEM]

\* Kathleen Rice Victory Fund

Full Name (Last, First, Middle Initial)

**B. Sondra Pilevsky**

Mailing Address 41 Harborview W

City

Lawrence

State

NY

Zip Code

11559-1911

FEC ID number of contributing  
federal political committee.

C

Name of Employer

N/A

Occupation

Homemaker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	2		2	0	1	4		

Transaction ID : C5922335

Amount of Each Receipt this Period

10000.00

[MEMO ITEM]

\* Kathleen Rice Victory Fund

Full Name (Last, First, Middle Initial)

**C. Michael Rafferty**

Mailing Address 64 2nd St

City

Garden City

State

NY

Zip Code

11530-4323

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Rafferty Capital Markets

Occupation

President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	1		2	0	1	4		

Transaction ID : C5922363

Amount of Each Receipt this Period

5000.00

[MEMO ITEM]

\* Kathleen Rice Victory Fund

SUBTOTAL of Receipts This Page (optional)..... ►

0.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 41 OF 224

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

A. Diana J. Riklis

Mailing Address 1020 Park Ave, Apt 19

City  
New York

State Zip Code  
NY 10028

FEC ID number of contributing  
federal political committee.

C

Name of Employer

N/A

Occupation

Homemaker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
09 / 11 / 2014

Transaction ID : C5922355

Amount of Each Receipt this Period

10000.00

[MEMO ITEM]

\* Kathleen Rice Victory Fund

Full Name (Last, First, Middle Initial)

B. Ira Riklis

Mailing Address 32 East 57th Street

City  
New York

State Zip Code  
NY 10022

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Sutherland Capital Mgmt. Inc.

Occupation

Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
09 / 11 / 2014

Transaction ID : C5922353

Amount of Each Receipt this Period

10000.00

[MEMO ITEM]

\* Kathleen Rice Victory Fund

Full Name (Last, First, Middle Initial)

C. Russell Rosenthal

Mailing Address 1233 Beech St, Apt 16

City  
Atlantic Beach

State Zip Code  
NY 11509-1629

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self Employed

Occupation

Commodities Trader

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
08 / 27 / 2014

Transaction ID : C5922328

Amount of Each Receipt this Period

10000.00

[MEMO ITEM]

\* Kathleen Rice Victory Fund

SUBTOTAL of Receipts This Page (optional)..... ►

0.00

TOTAL This Period (last page this line number only)..... ►

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 42 OF 224

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15			

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NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

A. Larry Roth

Mailing Address 201 Old Country Rd

City

Melville

State

NY

Zip Code

11747-2731

FEC ID number of contributing  
federal political committee.

C

Name of Employer

N/A

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	4			2	0	1	4		

Transaction ID : C5922338

Amount of Each Receipt this Period

5000.00

[MEMO ITEM]

\* Kathleen Rice Victory Fund

Full Name (Last, First, Middle Initial)

B. Howard J. Rubenstein

Mailing Address 1345 Avenue of the Americas, 30th

City

New York

State

NY

Zip Code

10105

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Rubenstein Associates, Inc.

Occupation

President/Public Relations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			2	8			2	0	1	4		

Transaction ID : C5922329

Amount of Each Receipt this Period

10000.00

[MEMO ITEM]

\* Kathleen Rice Victory Fund

Full Name (Last, First, Middle Initial)

c. Larry Sarf

Mailing Address 24 Shorecliff Pl

City

Great Neck

State

NY

Zip Code

11023-2016

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Market Service Inc.

Occupation

Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	9			2	0	1	4		

Transaction ID : C5922351

Amount of Each Receipt this Period

1000.00

[MEMO ITEM]

\* Kathleen Rice Victory Fund

SUBTOTAL of Receipts This Page (optional)..... ►

0.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

## **A. Adele Smithers**

Mailing Address 6 Frost Mill Rd

City State Zip Code  
 Mill Neck NY 11765-1100

FEC ID number of contributing  
federal political committee.

C

Name of Employer

N/A

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

09 / 15 / 2014

Transaction ID : C5922366

Amount of Each Receipt this Period

3000.00

[MEMO ITEM]

\* Kathleen Rice Victory Fund

Full Name (Last, First, Middle Initial)

## **B. Sheldon H. Solow**

Mailing Address 9 West 57th Street

City State Zip Code  
 New York NY 10019

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Solow Realty & Management

Occupation

Owner/Developer/Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

09 / 11 / 2014

Transaction ID : C5922359

Amount of Each Receipt this Period

10000.00

[MEMO ITEM]

\* Kathleen Rice Victory Fund

Full Name (Last, First, Middle Initial)

## **C. DAVID A. STERLING**

Mailing Address 33 WINDSOR DR

City State Zip Code  
 JERICHO NY 11753

FEC ID number of contributing  
federal political committee.

C

Name of Employer

STERLING & STERLING

Occupation

INSURANCE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2400.00

Date of Receipt

09 / 11 / 2014

Transaction ID : C5922358

Amount of Each Receipt this Period

2400.00

[MEMO ITEM]

\* Kathleen Rice Victory Fund

**SUBTOTAL** of Receipts This Page (optional)..... ►

0.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

## **A. Ilyse Sternberg**

Mailing Address 127 Babylon Ave

City State Zip Code  
 West Islip NY 11795-1231

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Maidenbaum & Sternberg

Occupation

Principal/Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 09 / 08 / 2014

**Transaction ID : C5922343**

Amount of Each Receipt this Period

5000.00

**[MEMO ITEM]**

\* Kathleen Rice Victory Fund

Full Name (Last, First, Middle Initial)

## **B. Anne Tennenbaum**

Mailing Address 322 E 57th St

City State Zip Code  
 New York NY 10022-2949

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self Employed

Occupation

Philanthropist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 09 / 16 / 2014

**Transaction ID : C5922369**

Amount of Each Receipt this Period

10000.00

**[MEMO ITEM]**

\* Kathleen Rice Victory Fund

Full Name (Last, First, Middle Initial)

## **C. Kate Whitney**

Mailing Address 126 E 66th St

City State Zip Code  
 New York NY 10065-6549

FEC ID number of contributing  
federal political committee.

C

Name of Employer

N/A

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 09 / 09 / 2014

**Transaction ID : C5922348**

Amount of Each Receipt this Period

10000.00

**[MEMO ITEM]**

\* Kathleen Rice Victory Fund

**SUBTOTAL** of Receipts This Page (optional)..... ►

0.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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NAME OF COMMITTEE (In Full)

**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

## **A. Donald Zucker**

Mailing Address 101 W. 55th Street

City  
New York

State Zip Code  
NY 10019

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Donald Zucker Company

Occupation  
Principal

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

09 / 12 / 2014

Transaction ID : C5922364

Amount of Each Receipt this Period

5000.00

**[MEMO ITEM]**

\* Kathleen Rice Victory Fund

Full Name (Last, First, Middle Initial)

## **B. KATHLEEN RICE VICTORY FUND**

Mailing Address 1050 17TH ST NW STE 590

City  
WASHINGTON

State Zip Code  
DC 20036

FEC ID number of contributing  
federal political committee.

C C00567594

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

301400.00

Date of Receipt

09 / 22 / 2014

Transaction ID : C5921672

Amount of Each Receipt this Period

1200.00

Full Name (Last, First, Middle Initial)

## **C. Ken Bloom**

Mailing Address 801 2nd Ave, Fl 15

City  
New York

State Zip Code  
NY 10017-4706

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Gartner & Bloom PC

Occupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

09 / 18 / 2014

Transaction ID : C5922387

Amount of Each Receipt this Period

2500.00

**[MEMO ITEM]**

\* Kathleen Rice Victory Fund

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1200.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

## **A. Francis Greenburger**

Mailing Address 55 5th Ave  
 Fl 15

City State Zip Code  
 New York NY 10003-4301

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Time Equities, Inc.

Occupation

Real Estate Developer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3237.50

Date of Receipt

MM / DD / YYYY  
 09 / 22 / 2014

Transaction ID : C5922724

Amount of Each Receipt this Period

3000.00

**[MEMO ITEM]**

\* Kathleen Rice Victory Fund

Full Name (Last, First, Middle Initial)

## **B. Adam Katz**

Mailing Address PO Box 560

City State Zip Code  
 Farmingdale NY 11735-0560

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Talon Air, Inc.

Occupation

Owner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

MM / DD / YYYY  
 09 / 22 / 2014

Transaction ID : C5922729

Amount of Each Receipt this Period

10000.00

**[MEMO ITEM]**

\* Kathleen Rice Victory Fund

Full Name (Last, First, Middle Initial)

## **C. Ivan Kaufman**

Mailing Address 144 Kings Point Rd

City State Zip Code  
 Great Neck NY 11024-1143

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Arbor Commercial Mortgage, LLC

Occupation

CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

MM / DD / YYYY  
 09 / 19 / 2014

Transaction ID : C5922388

Amount of Each Receipt this Period

5000.00

**[MEMO ITEM]**

\* Kathleen Rice Victory Fund

**SUBTOTAL** of Receipts This Page (optional)..... ►

0.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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for each category of the  
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NAME OF COMMITTEE (In Full)

**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

## **A. Harvey Krueger**

Mailing Address 745 7th Ave

City  
New York

State Zip Code  
NY 10019-6801

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Barclay's Capital

Occupation

Investment Banker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

MM / DD / YYYY  
09 / 22 / 2014

Transaction ID : C5922727

Amount of Each Receipt this Period

5000.00

**[MEMO ITEM]**

\* Kathleen Rice Victory Fund

Full Name (Last, First, Middle Initial)

## **B. Richard Minieri**

Mailing Address 737 Hunt Ln

City  
Manhasset

State Zip Code  
NY 11030-2821

FEC ID number of contributing  
federal political committee.

C

Name of Employer

ASM Mechanical - HVAC Systems

Occupation

Partner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

MM / DD / YYYY  
09 / 18 / 2014

Transaction ID : C5922386

Amount of Each Receipt this Period

5000.00

**[MEMO ITEM]**

\* Kathleen Rice Victory Fund

Full Name (Last, First, Middle Initial)

## **C. Laura Rabbit**

Mailing Address 17 Horseshoe Path

City  
Pawling

State Zip Code  
NY 12564

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self Employed/Compassion in Action, LL

Occupation

Spiritual Services/Counseling

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5100.00

Date of Receipt

MM / DD / YYYY  
09 / 19 / 2014

Transaction ID : C5922720

Amount of Each Receipt this Period

2600.00

**[MEMO ITEM]**

\* Kathleen Rice Victory Fund

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

## **A. Stanley Schuckman**

Mailing Address 8 Dorchester Dr

City State Zip Code  
 Glen Head NY 11545-3010

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Schuckman Realty Inc.

Occupation  
 Real Estate

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2600.00

Date of Receipt

09 / 19 / 2014

Transaction ID : C5922719

Amount of Each Receipt this Period

2600.00

[MEMO ITEM]

\* Kathleen Rice Victory Fund

Full Name (Last, First, Middle Initial)

## **B. KATHLEEN RICE VICTORY FUND - Unitemized**

Mailing Address 1050 17TH ST NW STE 590

City State Zip Code  
 WASHINGTON DC 20036

FEC ID number of contributing  
federal political committee.

C C00567594

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

114.00

Date of Receipt

09 / 22 / 2014

Transaction ID : CZ5921672

Amount of Each Receipt this Period

114.00

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

## **C. KATHLEEN RICE VICTORY FUND**

Mailing Address 1050 17TH ST NW STE 590

City State Zip Code  
 WASHINGTON DC 20036

FEC ID number of contributing  
federal political committee.

C C00567594

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

301400.00

Date of Receipt

09 / 23 / 2014

Transaction ID : C5921676

Amount of Each Receipt this Period

31000.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

31000.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

A. Scott M. Delman

Mailing Address 90 Elderfileds Rd

City

Manhasset

State

NY

Zip Code

11030-1623

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Spruce Productions LLC

Occupation

Theatre Producer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	3			2	0	1	4		

Transaction ID : C5922731

Amount of Each Receipt this Period

1000.00

[MEMO ITEM]

\* Kathleen Rice Victory Fund

Full Name (Last, First, Middle Initial)

B. George S. Kaufman

Mailing Address 450 Fashion Ave - Penthouse

City

New York

State

NY

Zip Code

10123

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Kaufman Management Co.

Occupation

President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	3			2	0	1	4		

Transaction ID : C5922732

Amount of Each Receipt this Period

5000.00

[MEMO ITEM]

\* Kathleen Rice Victory Fund

Full Name (Last, First, Middle Initial)

C. Laura Rabbit

Mailing Address 17 Horseshoe Path

City

Pawling

State

NY

Zip Code

12564

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self Employed/Compassion in Action, LL

Occupation

Spiritual Services/Counseling

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5100.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	3			2	0	1	4		

Transaction ID : C5922733

Amount of Each Receipt this Period

2500.00

[MEMO ITEM]

\* Kathleen Rice Victory Fund

SUBTOTAL of Receipts This Page (optional)..... ►

0.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A. KATHLEEN RICE VICTORY FUND**

Mailing Address 1050 17TH ST NW STE 590

City	State	Zip Code
WASHINGTON	DC	20036

FEC ID number of contributing federal political committee.

C C00567594

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

301400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	24	/	2014

Transaction ID : C5921683

Amount of Each Receipt this Period

46000.00

Full Name (Last, First, Middle Initial)

**B. Thomas Dooley**

Mailing Address 243 Cleft Rd

City	State	Zip Code
Mill Neck	NY	11765-1003

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Viacom

COO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	24	/	2014

Transaction ID : C5922740

Amount of Each Receipt this Period

10000.00

**[MEMO ITEM]**

\* Kathleen Rice Victory Fund

Full Name (Last, First, Middle Initial)

**C. Sheila Natbony**

Mailing Address 6 Saddle Ridge Rd

City	State	Zip Code
Old Westbury	NY	11568-1150

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Queens Long Island Medical Group

Physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	24	/	2014

Transaction ID : C5922739

Amount of Each Receipt this Period

500.00

**[MEMO ITEM]**

\* Kathleen Rice Victory Fund

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

46000.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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☐ 11a ☐ 11b ☐ 11c ☒ 12  
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NAME OF COMMITTEE (In Full)

**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. Joseph Plumeri**

Mailing Address 995 5th Ave

City

New York

State

NY

Zip Code

10028-0169

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Willis Holdings Group

Occupation

Chairman & CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

09 / 24 / 2014

**Transaction ID : C5922738**

Amount of Each Receipt this Period

10000.00

**[MEMO ITEM]**

\* Kathleen Rice Victory Fund

Full Name (Last, First, Middle Initial)

**B. KATHLEEN RICE VICTORY FUND**

Mailing Address 1050 17TH ST NW STE 590

City

WASHINGTON

State

DC

Zip Code

20036

FEC ID number of contributing  
federal political committee.

C C00567594

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

301400.00

Date of Receipt

09 / 26 / 2014

**Transaction ID : C5921687**

Amount of Each Receipt this Period

30000.00

Full Name (Last, First, Middle Initial)

**C. Anthony Bonomo**

Mailing Address 1800 Northern Blvd

City

Roslyn

State

NY

Zip Code

11576-1140

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Physicians Reciprocal Insurance

Occupation

Founder

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

09 / 26 / 2014

**Transaction ID : C5922748**

Amount of Each Receipt this Period

10000.00

**[MEMO ITEM]**

\* Kathleen Rice Victory Fund

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

30000.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A. Maryellen Bonomo**

Mailing Address 10 Walter Ln

City

Manhasset

State

NY

Zip Code

11030-1652

FEC ID number of contributing  
federal political committee.

C

Name of Employer

N/A

Occupation

Homemaker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	6		2	0	1	4		

Transaction ID : C5922749

Amount of Each Receipt this Period

10000.00

**[MEMO ITEM]**

\* Kathleen Rice Victory Fund

Full Name (Last, First, Middle Initial)

**B. Glen Lostritto**

Mailing Address 700 Hicksville Rd

City

Bethpage

State

NY

Zip Code

11714-3471

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Steel Equities

Occupation

Principal

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	6		2	0	1	4		

Transaction ID : C5922745

Amount of Each Receipt this Period

10000.00

**[MEMO ITEM]**

\* Kathleen Rice Victory Fund

Full Name (Last, First, Middle Initial)

**C. Deborah Rechler**

Mailing Address 58 Hoaglands Lane

City

Old Brookville

State

NY

Zip Code

11545

FEC ID number of contributing  
federal political committee.

C

Name of Employer

N/A

Occupation

Homemaker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	6		2	0	1	4		

Transaction ID : C5922750

Amount of Each Receipt this Period

10000.00

**[MEMO ITEM]**

\* Kathleen Rice Victory Fund

SUBTOTAL of Receipts This Page (optional)..... ►

0.00

TOTAL This Period (last page this line number only)..... ►

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

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for each category of the  
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NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

### A. Scott Rechler

Mailing Address 58 Hoaglands Lane

City State Zip Code  
Old Brookville NY 11545-2008

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RXR Realty LLC

Occupation

Chairman & CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

09 / 26 / 2014

Transaction ID : C5922752

Amount of Each Receipt this Period

10000.00

[MEMO ITEM]

\* Kathleen Rice Victory Fund

Full Name (Last, First, Middle Initial)

### B. KATHLEEN RICE VICTORY FUND

Mailing Address 1050 17TH ST NW STE 590

City State Zip Code  
WASHINGTON DC 20036

FEC ID number of contributing  
federal political committee.

C C00567594

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

301400.00

Date of Receipt

09 / 30 / 2014

Transaction ID : C5921689

Amount of Each Receipt this Period

5200.00

Full Name (Last, First, Middle Initial)

### C. Thomas Franklin

Mailing Address 380 Lexington Ave, Rm 5400

City State Zip Code  
New York NY 10168-5497

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Self Employed

Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

09 / 29 / 2014

Transaction ID : C5922754

Amount of Each Receipt this Period

2500.00

[MEMO ITEM]

\* Kathleen Rice Victory Fund

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

5200.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 54 OF 224

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A. Brian Gold**

Mailing Address 600 Food Center Dr

City	State	Zip Code
Bronx	NY	10474-7037

FEC ID number of contributing federal political committee.

C

Name of Employer  
Sultana Distribution Services

Occupation  
President/CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
09			29			2014			

Transaction ID : C5922755

Amount of Each Receipt this Period

10000.00

[MEMO ITEM]

\* Kathleen Rice Victory Fund

Full Name (Last, First, Middle Initial)

**B. SEAN ELDRIDGE VICTORY FUND**

Mailing Address 1050 17TH ST NW STE 590

City	State	Zip Code
WASHINGTON	DC	20036

FEC ID number of contributing federal political committee.

C C00565390

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

62847.40

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
09			08			2014			

Transaction ID : C5921648

Amount of Each Receipt this Period

16847.40

Full Name (Last, First, Middle Initial)

**C. Alix Ritchie**

Mailing Address PO Box 30220

City	State	Zip Code
Fort Lauderdale	FL	33303

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Self Employed

Foundation Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5200.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
09			05			2014			

Transaction ID : C5922302

Amount of Each Receipt this Period

5200.00

[MEMO ITEM]

\* Sean Eldridge Victory Fund

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

16847.40

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A. Jonathan Rose**

Mailing Address 33 Katonah Avenue

City	State	Zip Code
Katonah	NY	10536

FEC ID number of contributing federal political committee.

C

Name of Employer  
Jonathan Rose & Company

Occupation  
Real Estate Developer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2600.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	1		2	0	1	4

Transaction ID : C5922291

Amount of Each Receipt this Period

2600.00

**[MEMO ITEM]**

\* Sean Eldridge Victory Fund

Full Name (Last, First, Middle Initial)

**B. Jann Wenner**

Mailing Address 1290 Avenue of the Americas

City	State	Zip Code
New York	NY	10104

FEC ID number of contributing federal political committee.

C

Name of Employer  
Wenner Media

Occupation  
Owner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2600.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	7		2	0	1	4

Transaction ID : C5922298

Amount of Each Receipt this Period

2600.00

**[MEMO ITEM]**

\* Sean Eldridge Victory Fund

Full Name (Last, First, Middle Initial)

**C. SEAN ELDRIDGE VICTORY FUND**

Mailing Address 1050 17TH ST NW STE 590

City	State	Zip Code
WASHINGTON	DC	20036

FEC ID number of contributing federal political committee.

C C00565390

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

62847.40

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	9		2	0	1	4

Transaction ID : C5921668

Amount of Each Receipt this Period

18000.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

18000.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. Louis A. Bradbury**

Mailing Address 3 Quarty Circle

City

East Hampton

State

NY

Zip Code

11937

FEC ID number of contributing  
federal political committee.

C

Name of Employer

N/A

Occupation

Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2600.00

Date of Receipt

09 / 11 / 2014

Transaction ID : C5922378

Amount of Each Receipt this Period

2600.00

[MEMO ITEM]

\* Sean Eldridge Victory Fund

Full Name (Last, First, Middle Initial)

**B. Sharon Davis**

Mailing Address 9 E 81st Street

City

New York

State

NY

Zip Code

10028

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Sharon Davis Design

Occupation

Senior Partner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

09 / 08 / 2014

Transaction ID : C5922372

Amount of Each Receipt this Period

10000.00

[MEMO ITEM]

\* Sean Eldridge Victory Fund

Full Name (Last, First, Middle Initial)

**c. Faith Gay**

Mailing Address 40 Fifth Avenue #3A

City

New York

State

NY

Zip Code

10011

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Quinn Emanuel Urquhart & Sullivan LLP

Occupation

Partner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

09 / 12 / 2014

Transaction ID : C5922380

Amount of Each Receipt this Period

10000.00

[MEMO ITEM]

\* Sean Eldridge Victory Fund

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 57 OF 224

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

A. Charles Harris

Mailing Address 8 Parkview Road

City	State	Zip Code
Norwalk	CT	06853

FEC ID number of contributing federal political committee.

C

Name of Employer

The Edna MaConnell Clark Foundation

Occupation

Foundation Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	16	/	2014

Transaction ID : C5922382

Amount of Each Receipt this Period

5200.00

[MEMO ITEM]

\* Sean Eldridge Victory Fund

Full Name (Last, First, Middle Initial)

B. Steven L Holley

Mailing Address 832 Broadway 2nd Floor

City	State	Zip Code
New York	NY	10003

FEC ID number of contributing federal political committee.

C

Name of Employer

Sullivan &amp; Cromwell LLP

Occupation

Lawyer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	08	/	2014

Transaction ID : C5922376

Amount of Each Receipt this Period

2600.00

[MEMO ITEM]

\* Sean Eldridge Victory Fund

Full Name (Last, First, Middle Initial)

C. Jared Kushner

Mailing Address 666 5th Ave

City	State	Zip Code
New York	NY	10103

FEC ID number of contributing federal political committee.

C

Name of Employer

Kushner Companies

Occupation

CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	09	/	2014

Transaction ID : C5922377

Amount of Each Receipt this Period

10000.00

[MEMO ITEM]

\* Sean Eldridge Victory Fund

SUBTOTAL of Receipts This Page (optional).....▶

0.00

TOTAL This Period (last page this line number only).....▶

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 58 OF 224

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15			

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NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A. Joshua Kushner**

Mailing Address 295 Lafayette Street  
Ste 701

City State Zip Code  
New York NY 10012

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Thrive Capital

Occupation

Managing Partner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
09 08 2014

Transaction ID : C5922371

Amount of Each Receipt this Period

5000.00

[MEMO ITEM]

\* Sean Eldridge Victory Fund

Full Name (Last, First, Middle Initial)

**B. Peter Lyons**

Mailing Address 205 West 19th Street  
#10R

City State Zip Code  
New York NY 10011

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Leeds Equity Partners

Occupation

Finance

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2600.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
09 04 2014

Transaction ID : C5922375

Amount of Each Receipt this Period

2600.00

[MEMO ITEM]

\* Sean Eldridge Victory Fund

Full Name (Last, First, Middle Initial)

**C. John Metzner**

Mailing Address 312 11th Avenue

City State Zip Code  
New York NY 10001

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SPC LP

Occupation

COO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
09 17 2014

Transaction ID : C5922384

Amount of Each Receipt this Period

1000.00

[MEMO ITEM]

\* Sean Eldridge Victory Fund

SUBTOTAL of Receipts This Page (optional).....▶

0.00

TOTAL This Period (last page this line number only).....▶

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 59 OF 224

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

A. Mario J. Palumbo Jr.

Mailing Address 1995 Broadway Floor 3

City  
New York

State Zip Code  
NY 10023

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Millennium Partners

Occupation

Real Estate Developer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	04	/	2014

Transaction ID : C5922374

Amount of Each Receipt this Period

10000.00

[MEMO ITEM]

\* Sean Eldridge Victory Fund

Full Name (Last, First, Middle Initial)

B. Frederic Rich

Mailing Address 70 Little West Street, PH2B

City  
New York

State Zip Code  
NY 10004

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Sullivan &amp; Cromwell LLP

Occupation

Lawyer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	16	/	2014

Transaction ID : C5922383

Amount of Each Receipt this Period

2600.00

[MEMO ITEM]

\* Sean Eldridge Victory Fund

Full Name (Last, First, Middle Initial)

C. David Schwarz

Mailing Address 1707 L St NW

City  
Washington

State Zip Code  
DC 20036

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self Employed

Occupation

Architect

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	17	/	2014

Transaction ID : C5922385

Amount of Each Receipt this Period

5200.00

[MEMO ITEM]

\* Sean Eldridge Victory Fund

SUBTOTAL of Receipts This Page (optional)..... ►

0.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. Joy Tomchin**

Mailing Address 4 Oscawana Heights Rd

City

Putnam Valley

State

NY

Zip Code

10579-2304

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self Employed

Occupation

Real Estate Developer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5200.00

Date of Receipt

09 / 08 / 2014

**Transaction ID : C5922373**

Amount of Each Receipt this Period

5200.00

**[MEMO ITEM]**

\* Sean Eldridge Victory Fund

Full Name (Last, First, Middle Initial)

**B. WOOLF VICTORY FUND**

Mailing Address 410 1ST ST, SE  
SUITE 310

City

WASHINGTON

State

DC

Zip Code

20003

FEC ID number of contributing  
federal political committee.

C C00566539

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

23405.57

Date of Receipt

09 / 03 / 2014

**Transaction ID : C5921634**

Amount of Each Receipt this Period

11990.10

Full Name (Last, First, Middle Initial)

**C. Elissa Cullman**

Mailing Address 880 3rd Avenue

City

New York

State

NY

Zip Code

10022

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cullman & Kravis

Occupation

Principal

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2400.00

Date of Receipt

08 / 20 / 2014

**Transaction ID : C5922277**

Amount of Each Receipt this Period

2400.00

**[MEMO ITEM]**

\* Woolf Victory Fund

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

11990.10

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. Susan R. Cullman**

Mailing Address 88 Saddle Rock Road

City

Stamford

State

CT

Zip Code

06902

FEC ID number of contributing  
federal political committee.

C

Name of Employer

N/A

Occupation

Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

08 / 25 / 2014

Transaction ID : C5922282

Amount of Each Receipt this Period

10000.00

**[MEMO ITEM]**

\* Woolf Victory Fund

Full Name (Last, First, Middle Initial)

**B. WOOLF VICTORY FUND**

Mailing Address 410 1ST ST, SE  
SUITE 310

City

WASHINGTON

State

DC

Zip Code

20003

FEC ID number of contributing  
federal political committee.

C C00566539

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

23405.57

Date of Receipt

09 / 23 / 2014

Transaction ID : C5921680

Amount of Each Receipt this Period

7415.47

Full Name (Last, First, Middle Initial)

**C. Jack Bendheim**

Mailing Address 300 Frank W Burr Blvd

City

Teaneck

State

NJ

Zip Code

07666

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Philbro Animal Health Corporation

Occupation

Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2400.00

Date of Receipt

09 / 15 / 2014

Transaction ID : C5922736

Amount of Each Receipt this Period

2400.00

**[MEMO ITEM]**

\* Woolf Victory Fund

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

7415.47

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

## **A. Merliee Bostock**

Mailing Address 7 Manursing Island

City State Zip Code  
 Rye NY 10580

FEC ID number of contributing  
federal political committee.

C

Name of Employer

N/A

Occupation

Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 09 / 15 / 2014

Transaction ID : C5922735

Amount of Each Receipt this Period

400.00

**[MEMO ITEM]**

\* Woolf Victory Fund

Full Name (Last, First, Middle Initial)

## **B. Thomas Israel**

Mailing Address 12 East 49th Street

City State Zip Code  
 New York NY 10017

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AC Israel Ent Inc.

Occupation

Investor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 09 / 11 / 2014

Transaction ID : C5922734

Amount of Each Receipt this Period

5000.00

**[MEMO ITEM]**

\* Woolf Victory Fund

Full Name (Last, First, Middle Initial)

## **C.**

Mailing Address

City State Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional)..... ►

0.00

**TOTAL** This Period (last page this line number only)..... ►

1388237.25

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

## **A. Eleanor Roosevelt Legacy Committee, Inc.**

Mailing Address P.O. Box 20293,

Greeley Square Station

City

New York

State

NY

Zip Code

10001

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

8166.15

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 24 / 2014

**Transaction ID : C5894031**

Amount of Each Receipt this Period

5444.10

Health Insurance

Full Name (Last, First, Middle Initial)

## **B. PAYCHEX**

Mailing Address 1551 S. Washington Ave.,

P.O. Box 1180

City

Piscataway

State

NJ

Zip Code

08854

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2152.39

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 29 / 2014

**Transaction ID : C5925476**

Amount of Each Receipt this Period

227.13

Payroll-refund

Full Name (Last, First, Middle Initial)

## **C.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

5671.23

5671.23

: 97 `A-G79 @G B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A-N5HCB  
.

Form/Schedule: SA15  
Transaction ID : C5894031

This is not a contribution. This is an offset to health insurance that we paid to Oxford Health Plans and the expenditure is reported on Schedule H4, Line 21(a).

Form/Schedule:  
Transaction ID:

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

## **A. Friends for Kathy Hochul**

Mailing Address P.O. Box 122

City  
Buffalo

State  
NY

Zip Code  
14201

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 08 / 2014

**Transaction ID : C5889659**

Amount of Each Receipt this Period

4500.00

Payroll Expenses

Full Name (Last, First, Middle Initial)

## **B. Moschetta for Glen Cove**

Mailing Address 36 Highfield Rd.

City

Glen Cove

State

NY

Zip Code

11542

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 24 / 2014

**Transaction ID : C5895051**

Amount of Each Receipt this Period

275.00

Voter File Access

Full Name (Last, First, Middle Initial)

## **C.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

4775.00

4775.00

: 97 `A-G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+9A-N5HCB  
.

Form/Schedule: SA17

Transaction ID : C5895051

Please be advised that the amount received by the Committee on Line 17 was for access to the Committee's voter file. The amount charged reflects the prevailing fair market value for access to such data and was based on a survey of comparable vendors.

Form/Schedule:

Transaction ID:



**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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☒ 21b   ☐ 22   ☐ 23   ☐ 24   ☐ 25   ☐ 26  
☐ 27   ☐ 28a   ☐ 28b   ☐ 28c   ☐ 29   ☐ 30b

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NAME OF COMMITTEE (In Full)

**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. 8x8, Inc.**

Mailing Address Dept. 848080

City Los Angeles      State CA      Zip Code 90084-8080

Purpose of Disbursement  
VOIP Phones

Candidate Name

Office Sought:   ☐ House  
                          ☐ Senate  
                          ☐ President

State:      District:

Disbursement For:  
☐ Primary      ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 04 / 2014
**Transaction ID : D414171**

Amount of Each Disbursement this Period

1159.67

Full Name (Last, First, Middle Initial)

**B. 8x8, Inc.**

Mailing Address Dept. 848080

City Los Angeles      State CA      Zip Code 90084-8080

Purpose of Disbursement  
VOIP Phones

Candidate Name

Office Sought:   ☐ House  
                          ☐ Senate  
                          ☐ President

State:      District:

Disbursement For:  
☐ Primary      ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 04 / 2014
**Transaction ID : D414180**

Amount of Each Disbursement this Period

423.47

Full Name (Last, First, Middle Initial)

**C. 8x8, Inc.**

Mailing Address Dept. 848080

City Los Angeles      State CA      Zip Code 90084-8080

Purpose of Disbursement  
VOIP Phones

Candidate Name

Office Sought:   ☐ House  
                          ☐ Senate  
                          ☐ President

State:      District:

Disbursement For:  
☐ Primary      ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 18 / 2014
**Transaction ID : D414265**

Amount of Each Disbursement this Period

442.51

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2025.65

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

New York State Democratic Committee

523.22

476.14



**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. Cablevision**

Mailing Address PO Box 371378

City Pittsburgh      State PA      Zip Code 15250-7378

Purpose of Disbursement  
Telephone & Internet

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 09 / 2014
**Transaction ID : D415532**

Amount of Each Disbursement this Period

69.85

Full Name (Last, First, Middle Initial)

**B. Cablevision**

Mailing Address PO Box 371378

City Pittsburgh      State PA      Zip Code 15250-7378

Purpose of Disbursement  
Telephone & Internet

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 30 / 2014
**Transaction ID : D415583**

Amount of Each Disbursement this Period

69.85

Full Name (Last, First, Middle Initial)

**C. Cablevision**

Mailing Address PO Box 371378

City Pittsburgh      State PA      Zip Code 15250-7378

Purpose of Disbursement  
Telephone & Internet

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 30 / 2014
**Transaction ID : D415584**

Amount of Each Disbursement this Period

69.85

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

209.55

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. Cablevision**

Mailing Address PO Box 371378

City Pittsburgh      State PA      Zip Code 15250-7378

Purpose of Disbursement  
Telephone & Internet

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 30 / 2014
**Transaction ID : D415585**

Amount of Each Disbursement this Period

69.85

Full Name (Last, First, Middle Initial)

**B. David Berman**

Mailing Address 362 St. Marks Place

City Staten Island      State NY      Zip Code 10301

Purpose of Disbursement  
Office Rent

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 23 / 2014
**Transaction ID : D415556**

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

**C. David Berman**

Mailing Address 362 St. Marks Place

City Staten Island      State NY      Zip Code 10301

Purpose of Disbursement  
Office Rent

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 09 / 2014
**Transaction ID : D415539**

Amount of Each Disbursement this Period

2500.00

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

5069.85

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

New York State Democratic Committee

### A. Democracy Engine LLC

Date of Disbursement

Transaction ID : D413050

Category/  
Type

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Amount of Each Disbursement this Period

3.50

### B. Democracy Engine LLC

Date of Disbursement

MM / DD / YYYY

Transaction ID : D413053

Category/  
Type

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:  District:

Amount of Each Disbursement this Period

31.30

### C. Democracy Engine LLC

Date of Disbursement

09 / 17 / 2014

Transaction ID : D413239

Category/  
Type

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:  District:

Amount of Each Disbursement this Period

202.00

**SUBTOTAL** of Disbursements This Page (optional).....

236.80

**TOTAL** This Period (last page this line number only).....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE**Mailing Address 430 South Capitol Street SE  
2nd Floor

City Washington State DC Zip Code 20003

Purpose of Disbursement  
Lodging

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y  
09 / 22 / 2014**Transaction ID : D415705**

Amount of Each Disbursement this Period

886.28

\* In-Kind Received

Full Name (Last, First, Middle Initial)

**B. Democratic National Committee**

Mailing Address 430 South Capitol Street, SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
On-Line Voter File Access

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y  
09 / 30 / 2014**Transaction ID : D415706**

Amount of Each Disbursement this Period

3220.00

\* In-Kind Received

Full Name (Last, First, Middle Initial)

**C. Duchess Point II LLC**

Mailing Address PO Box 229

City Beacon State NY Zip Code 12508

Purpose of Disbursement  
Office Security Deposit & Rent

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y  
09 / 23 / 2014**Transaction ID : D415572**

Amount of Each Disbursement this Period

1250.00

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

5356.28

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. FedEx**

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9				1	0		2	0	1	4		

Mailing Address P.O. Box 371461

City	State	Zip Code
Pittsburgh	PA	15250-7461

**Transaction ID : D415984**Purpose of Disbursement  
Shipping

Amount of Each Disbursement this Period

Candidate Name

  
Category/  
Type

350.18

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Full Name (Last, First, Middle Initial)

**B. Friends of Jason Zove**

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9				1	8		2	0	1	4		

Mailing Address PO Box 608

City	State	Zip Code
Smithtown	NY	11787

**Transaction ID : D415544**Purpose of Disbursement  
Office Rent

Amount of Each Disbursement this Period

Candidate Name

  
Category/  
Type

300.00

**Jason Zove**

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Full Name (Last, First, Middle Initial)

**C. Kaidas Properties, LLC**

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9				1	8		2	0	1	4		

Mailing Address PO Box 268

City	State	Zip Code
Cleverdale	NY	12820

**Transaction ID : D414264**Purpose of Disbursement  
Office Rent

Amount of Each Disbursement this Period

Candidate Name

  
Category/  
Type

1500.00

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2150.18

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. Leith McLoughlin**

Mailing Address 436 Hill Street

City Southampton      State NY      Zip Code 11968

Purpose of Disbursement  
Office Rent

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 09 / 2014
**Transaction ID : D414228**

Amount of Each Disbursement this Period

1500.00

Full Name (Last, First, Middle Initial)

**B. Maggio Sanitation Service, Inc.**

Mailing Address 88 Old Dock Road

City Yaphank      State NY      Zip Code 11980

Purpose of Disbursement  
Sanitation Service

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 09 / 2014
**Transaction ID : D415534**

Amount of Each Disbursement this Period

32.59

Full Name (Last, First, Middle Initial)

**C. National Grid**

Mailing Address PO Box 11742

City Newark      State NJ      Zip Code 07101-4742

Purpose of Disbursement  
Utilities

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 09 / 2014
**Transaction ID : D414235**

Amount of Each Disbursement this Period

366.54

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1899.13

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

New York State Democratic Committee

Category/  
Type

1000.00

State:  District:

MM / DD / YYYY

Category/  
Type

327.88

State:  District:

Category/  
Type

Age group	Number of people
0-14	100
15-24	200
25-34	300
35-44	400
45-54	500
55-64	600
65-74	700
75-84	800
85-94	900
95-104	1000

State:  District:

2227.88

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

## **A. PAYCHEX**

Mailing Address 1551 S. Washington Ave.,  
P.O. Box 1180

City State Zip Code  
Piscataway NJ 08854

Purpose of Disbursement  
Payroll Service

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y  
09 / 10 / 2014

**Transaction ID : D416343**

Amount of Each Disbursement this Period

1217.77

Full Name (Last, First, Middle Initial)

## **B. Postmaster**

Mailing Address 550 Manor Rd

City State Zip Code  
Staten Island NY 10314

Purpose of Disbursement  
Postage Permit Renewal Non-Candidate Specific

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y  
09 / 18 / 2014

**Transaction ID : D414251**

Amount of Each Disbursement this Period

220.00

Full Name (Last, First, Middle Initial)

## **C. Postmaster**

Mailing Address P.O. Box 3576

City State Zip Code  
Syracuse NY 13220-3576

Purpose of Disbursement  
Postage Permit Renewal Non-Candidate Specific

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y  
09 / 18 / 2014

**Transaction ID : D414261**

Amount of Each Disbursement this Period

220.00

**SUBTOTAL** of Disbursements This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1657.77

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. Postmaster**

Mailing Address 170 East Main Street

City Patchogue      State NY      Zip Code 11772

Purpose of Disbursement  
Postage Permit Renewal Non-Candidate Specific

Candidate Name

Office Sought:    ☐ House  
                         ☐ Senate  
                         ☐ President

State:      District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09      04      2014
**Transaction ID : D413606**

Amount of Each Disbursement this Period

220.00

Full Name (Last, First, Middle Initial)

**B. PSEG Long Island**

Mailing Address 460 E. Main Street

City Patchogue      State NY      Zip Code 11772

Purpose of Disbursement  
Utilities

Candidate Name

Office Sought:    ☐ House  
                         ☐ Senate  
                         ☐ President

State:      District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09      23      2014
**Transaction ID : D414270**

Amount of Each Disbursement this Period

143.83

Full Name (Last, First, Middle Initial)

**C. Stars & Stripes Democratic Club**

Mailing Address 7410 14th Avenue

City Brooklyn      State NY      Zip Code 11228

Purpose of Disbursement  
Office Rent

Candidate Name

Office Sought:    ☐ House  
                         ☐ Senate  
                         ☐ President

State:      District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09      23      2014
**Transaction ID : D414268**

Amount of Each Disbursement this Period

1500.00

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1863.83

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

New York State Democratic Committee

1474.75

110.32

112.94

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. Time Warner Cable**

Mailing Address P.O. Box 70872

City Charlotte      State NC      Zip Code 28272-0872

Purpose of Disbursement  
Internet & Video Services

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 04 / 2014
**Transaction ID : D414189**

Amount of Each Disbursement this Period

248.84

Full Name (Last, First, Middle Initial)

**B. Time Warner Cable**

Mailing Address P.O. Box 70872

City Charlotte      State NC      Zip Code 28272-0872

Purpose of Disbursement  
Internet

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 30 / 2014
**Transaction ID : D414273**

Amount of Each Disbursement this Period

112.94

Full Name (Last, First, Middle Initial)

**C. Time Warner Cable**

Mailing Address P.O. Box 70872

City Charlotte      State NC      Zip Code 28272-0872

Purpose of Disbursement  
Internet

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 30 / 2014
**Transaction ID : D414274**

Amount of Each Disbursement this Period

213.94

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

575.72

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. Time Warner Cable**

Mailing Address PO Box 11820

City Newark                      State NJ                      Zip Code 07101-8120

Purpose of Disbursement  
Internet

Candidate Name

Office Sought:    ☐ House  
                         ☐ Senate  
                         ☐ President  
State:                      District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y  
09                      04                      2014
**Transaction ID : D415533**

Amount of Each Disbursement this Period

247.38

Full Name (Last, First, Middle Initial)

**B. Verizon**

Mailing Address P.O. Box 15124

City Albany                      State NY                      Zip Code 12212-5124

Purpose of Disbursement  
Internet

Candidate Name

Office Sought:    ☐ House  
                         ☐ Senate  
                         ☐ President  
State:                      District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y  
09                      30                      2014
**Transaction ID : D414275**

Amount of Each Disbursement this Period

94.06

Full Name (Last, First, Middle Initial)

**C. Verizon**

Mailing Address P.O. Box 15124

City Albany                      State NY                      Zip Code 12212-5124

Purpose of Disbursement  
Telephone & Internet

Candidate Name

Office Sought:    ☐ House  
                         ☐ Senate  
                         ☐ President  
State:                      District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y  
09                      09                      2014
**Transaction ID : D414245**

Amount of Each Disbursement this Period

271.52

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

612.96

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A. Verizon**

Mailing Address P.O. Box 15124

City	State	Zip Code
Albany	NY	12212-5124

Purpose of Disbursement  
Internet

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	18	/	2014

Transaction ID : D414250

Amount of Each Disbursement this Period

138.92
--------

Full Name (Last, First, Middle Initial)

**B. Verizon**

Mailing Address P.O. Box 15124

City	State	Zip Code
Albany	NY	12212-5124

Purpose of Disbursement  
Internet

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	18	/	2014

Transaction ID : D416275

Amount of Each Disbursement this Period

113.40
--------

Full Name (Last, First, Middle Initial)

**C. Adin Lenchner**

Mailing Address 800 Riverside Drive Apt Dup-E

City	State	Zip Code
New York	NY	10032

Purpose of Disbursement  
Expense Reimbursements-see below

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	04	/	2014

Transaction ID : D413607

Amount of Each Disbursement this Period

554.67
--------

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

806.99

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. Home Depot**

Mailing Address 545 Targee St

City Staten Island      State NY      Zip Code 10304

Purpose of Disbursement  
Tables, Chairs, Keys & Cleaning Supplies

Candidate Name

Office Sought:    ☐ House  
                         ☐ Senate  
                         ☐ President

State:      District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y  
09      04      2014
**Transaction ID : D413608**

Amount of Each Disbursement this Period

554.67

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B. Jesse Hassinger**

Mailing Address 3605 Keystone Avenue

City Baltimore      State MD      Zip Code 21211

Purpose of Disbursement  
Expense Reimbursements-see below

Candidate Name

Office Sought:    ☐ House  
                         ☐ Senate  
                         ☐ President

State:      District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y  
09      04      2014
**Transaction ID : D413609**

Amount of Each Disbursement this Period

596.04

Full Name (Last, First, Middle Initial)

**C. Amazon.com**

Mailing Address 1516 2nd Avenue, FL 4

City Seattle      State WA      Zip Code 98101-1543

Purpose of Disbursement  
Toners, Routers, Power Strips & Water

Candidate Name

Office Sought:    ☐ House  
                         ☐ Senate  
                         ☐ President

State:      District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y  
09      04      2014
**Transaction ID : D413618**

Amount of Each Disbursement this Period

512.06

**[MEMO ITEM]****SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

596.04

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A. SuppliesOutlet.com, Inc.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		04		2014

Mailing Address 500 Damonte Ranch Parkway Suite 94

City	State	Zip Code
Reno	NV	89521

Purpose of Disbursement  
Toner

Candidate Name

Category/  
Type

Transaction ID : D413610

Amount of Each Disbursement this Period

724.09
--------

[MEMO ITEM]

Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State:	District:		

Full Name (Last, First, Middle Initial)

**B. Chris Alexander**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		04		2014

Mailing Address 521 East Washington Street

City	State	Zip Code
Syracuse	NY	13202

Purpose of Disbursement  
Expense Reimbursements-see below

Candidate Name

Category/  
Type

Transaction ID : D413620

Amount of Each Disbursement this Period

724.09
--------

Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State:	District:		

Full Name (Last, First, Middle Initial)

**C. Best Buy**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		04		2014

Mailing Address 9090 Carousel Center

City	State	Zip Code
Syracuse	NY	13290

Purpose of Disbursement  
Toners

Candidate Name

Category/  
Type

Transaction ID : D415525

Amount of Each Disbursement this Period

328.28
--------

[MEMO ITEM]

Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State:	District:		

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

724.09
--------

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<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

New York State Democratic Committee

### A. TOPS

Category/  
Type

3.87

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State:	District:		

### B. Walmart

09 / 04 / 2014

Category/  
Type

37.67

Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <div style="display: flex; justify-content: space-between;"> <span><input type="checkbox"/> Primary</span> <span><input type="checkbox"/> General</span> </div> <input type="checkbox"/> Other (specify) ▼
State: _____	District: _____

**C. Wegmans**

Category/  
Type

16.00

Office Sought:	<input type="checkbox"/> House	Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Senate		<input type="checkbox"/> Other (specify) ▼	
	<input type="checkbox"/> President			
State:	District:			

0.00





<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

New York State Democratic Committee

### A. Russell Leibowitz

Date of Disbursement

Mailing Address 403 Mountain Ridge Drive

City	State	Zip Code
Mount Sinai	NY	11766

Transaction ID : D415535

Purpose of Disbursement
Expense Reimbursements-see below

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State:  District:

Full Name (Last, First, Middle Initial)

## B. Staples

Date of Disbursement

Mailing Address 2799 Route 112

MM / DD / YYYY

City	State	Zip Code
Medford	NY	11763

Transaction ID : D415537

### Purpose of Disbursement Labels

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:  District:

Full Name (Last, First, Middle Initial)

### C. Staples

Date of Disbursement

Mailing Address 500 Staples Drive

Three digital displays are shown, each with a different segment missing. The first display shows '09' with the top-left segment missing. The second display shows '09' with the top-right segment missing. The third display shows '2014' with the top-left segment missing.

City	State	Zip Code
Framingham	MA	01702

Transaction ID : D415538

Purpose of Disbursement
Laptops

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:  District:

**SUBTOTAL** of Disbursements This Page (optional).....

1202.01

**TOTAL** This Period (last page this line number only).....

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

New York State Democratic Committee

Category/  
Type

42.28

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

MM / DD / YYYY

Category/  
Type

397.00

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

The image shows three separate boxes, each representing a part of a date. The first box contains the letters 'M' and 'M' with the number '09' below them. The second box contains the letters 'D' and 'D' with the number '09' below them. The third box contains the letters 'Y' and 'Y' with the number '2014' below them. The boxes are arranged horizontally and separated by slashes.

Category/  
Type

397.00

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

397.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. Jason Robert Henry**

Mailing Address 288 Harford Road

City Brooktondale      State NY      Zip Code 14817

Purpose of Disbursement  
Expense Reimbursements-see below

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 18 / 2014
**Transaction ID : D415545**

Amount of Each Disbursement this Period

651.50

Full Name (Last, First, Middle Initial)

**B. NYSEG**

Mailing Address P.O. Box 847812

City Boston      State MA      Zip Code 02284-7812

Purpose of Disbursement  
Utilities

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 18 / 2014
**Transaction ID : D415550**

Amount of Each Disbursement this Period

102.95

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. Staples**

Mailing Address 744 South Meadow Street Suite 200

City Ithaca      State NY      Zip Code 14850

Purpose of Disbursement  
Printers & Toners

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 18 / 2014
**Transaction ID : D415548**

Amount of Each Disbursement this Period

254.86

**[MEMO ITEM]****SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

651.50

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. Target**

Mailing Address 930 County Road 64

City Elmira                      State NY                      Zip Code 14903

Purpose of Disbursement  
Cleaning Supplies, Tape, Trash Cans

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:                      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09                      18                      2014
**Transaction ID : D415546**

Amount of Each Disbursement this Period

121.14

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B. Walmart**

Mailing Address 135 Fairgrounds Memorial Parkway

City Ithaca                      State NY                      Zip Code 14850

Purpose of Disbursement  
Pens, Clips, Scissors, Clipboards & Staplers

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:                      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09                      18                      2014
**Transaction ID : D415547**

Amount of Each Disbursement this Period

82.28

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. Walmart**

Mailing Address 990 State Route 5 and 20

City Geneva                      State NY                      Zip Code 14456

Purpose of Disbursement  
Pens, Clipboards, Copy Paper, Pins & Rubberbands

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:                      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09                      18                      2014
**Transaction ID : D415549**

Amount of Each Disbursement this Period

90.37

**[MEMO ITEM]****SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. Reggie Harris**

Mailing Address 1172 Victory Blvd

City Staten Island      State NY      Zip Code 10301

Purpose of Disbursement  
Expense Reimbursements-see below

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 18 / 2014
**Transaction ID : D415551**

Amount of Each Disbursement this Period

208.04

Full Name (Last, First, Middle Initial)

**B. Doody Home Center**

Mailing Address 1677 Victory Blvd

City Staten Island      State NY      Zip Code 10314

Purpose of Disbursement  
Paint

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 18 / 2014
**Transaction ID : D415554**

Amount of Each Disbursement this Period

57.26

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. Home Depot**

Mailing Address 545 Targee St

City Staten Island      State NY      Zip Code 10304

Purpose of Disbursement  
Paint, Oscillating Fan, Step Ladder & Paint Sprayer

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 18 / 2014
**Transaction ID : D415552**

Amount of Each Disbursement this Period

144.79

**[MEMO ITEM]****SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

208.04

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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NAME OF COMMITTEE (In Full)

**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

## **A. Walgreens**

Mailing Address 1161 Victory Blvd

City Staten Island State NY Zip Code 10301

Purpose of Disbursement  
Office Padlock

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 18 / 2014

**Transaction ID : D415553**

Amount of Each Disbursement this Period

5.99

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

## **B. Chelsea Dietlin**

Mailing Address 340 Third Avenue Apt. 207

City Jersey City State NJ Zip Code 07302

Purpose of Disbursement  
Expense Reimbursements-see below

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 23 / 2014

**Transaction ID : D415557**

Amount of Each Disbursement this Period

288.36

Full Name (Last, First, Middle Initial)

## **C. Greatway Electrical & HVAC Supply**

Mailing Address 7024 New Utrecht Ave

City Brooklyn State NY Zip Code 11228

Purpose of Disbursement  
Office Keys

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 23 / 2014

**Transaction ID : D415560**

Amount of Each Disbursement this Period

16.33

**[MEMO ITEM]**

**SUBTOTAL** of Disbursements This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

288.36

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)

**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. Outflation Discount Corp.**

Mailing Address 7315 15th Ave

City Brooklyn      State NY      Zip Code 11228

Purpose of Disbursement  
Cleaning Supplies, Paper, Pens & Notebooks

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 23 / 2014
**Transaction ID : D415561**

Amount of Each Disbursement this Period

230.68

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B. Staples**

Mailing Address 500 Staples Drive

City Framingham      State MA      Zip Code 01702

Purpose of Disbursement  
Office Signs

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 23 / 2014
**Transaction ID : D415559**

Amount of Each Disbursement this Period

41.35

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. Adin Lenchner**

Mailing Address 800 Riverside Drive Apt Dup-E

City New York      State NY      Zip Code 10032

Purpose of Disbursement  
Expense Reimbursements-see below

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 23 / 2014
**Transaction ID : D415562**

Amount of Each Disbursement this Period

235.02

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

235.02

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
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(check only one)

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☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. Home Depot**

Mailing Address 545 Targee St

City Staten Island      State NY      Zip Code 10304

Purpose of Disbursement  
Paper Towels & Tables

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State:      District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09      23      2014
**Transaction ID : D415563**

Amount of Each Disbursement this Period

235.02

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B. Russell Leibowitz**

Mailing Address 403 Mountain Ridge Drive

City Mount Sinai      State NY      Zip Code 11766

Purpose of Disbursement  
Expense Reimbursements-see below

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State:      District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09      23      2014
**Transaction ID : D415564**

Amount of Each Disbursement this Period

100.69

Full Name (Last, First, Middle Initial)

**C. Lowe's Home Centers, LLC**

Mailing Address 2796 Route 112

City Medford      State NY      Zip Code 11763

Purpose of Disbursement  
Office Key Copies

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State:      District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09      23      2014
**Transaction ID : D415566**

Amount of Each Disbursement this Period

17.12

**[MEMO ITEM]****SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

100.69

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. Staples**

Mailing Address 2799 Route 112

City Medford      State NY      Zip Code 11763

Purpose of Disbursement  
Copy Paper & Cleaning Supplies

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State:      District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09      23      2014
**Transaction ID : D415567**

Amount of Each Disbursement this Period

83.57

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B. Robert T Barber**

Mailing Address 24 Pierrepont Avenue

City Potsdam      State NY      Zip Code 13676

Purpose of Disbursement  
Expense Reimbursements-see below

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State:      District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09      23      2014
**Transaction ID : D415568**

Amount of Each Disbursement this Period

77.35

Full Name (Last, First, Middle Initial)

**C. Warren County Clerk**

Mailing Address 1340 State Route 9

City Lake George      State NY      Zip Code 12845

Purpose of Disbursement  
Court Document Copies

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State:      District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09      23      2014
**Transaction ID : D415569**

Amount of Each Disbursement this Period

77.35

**[MEMO ITEM]****SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

77.35

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. Isabelle Parker**

Mailing Address 106-16 159th St Apt. 6G

City State Zip Code  
Jamaica NY 11433
Purpose of Disbursement  
Expense Reimbursements-see below

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y  
09 25 2014
**Transaction ID : D415573**

Amount of Each Disbursement this Period

395.05

Full Name (Last, First, Middle Initial)

**B. CITGO Oil Co.**

Mailing Address 6100 S Yale Avenue

City State Zip Code  
Tulsa OK 74136-1905
Purpose of Disbursement  
Travel

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y  
09 25 2014
**Transaction ID : D415575**

Amount of Each Disbursement this Period

83.64

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. Dunkin' Donuts**

Mailing Address 712 3rd Ave

City State Zip Code  
New York NY 10017
Purpose of Disbursement  
Food & Beverages

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y  
09 25 2014
**Transaction ID : D415576**

Amount of Each Disbursement this Period

29.41

**[MEMO ITEM]****SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

395.05

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
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☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. MTA New York City Transit**

Mailing Address 370 Jay Street

City Brooklyn    State NY    Zip Code 11201-5190

Purpose of Disbursement  
Travel

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State:    District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 25 / 2014
**Transaction ID : D415574**

Amount of Each Disbursement this Period

282.00

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B. Russell Leibowitz**

Mailing Address 403 Mountain Ridge Drive

City Mount Sinai    State NY    Zip Code 11766

Purpose of Disbursement  
Expense Reimbursements-see below

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State:    District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 29 / 2014
**Transaction ID : D415577**

Amount of Each Disbursement this Period

623.74

Full Name (Last, First, Middle Initial)

**C. Best Buy**

Mailing Address 7601 Penn Ave. S

City Minneapolis    State MN    Zip Code 55423

Purpose of Disbursement  
Cell Phone Booster

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State:    District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 29 / 2014
**Transaction ID : D415579**

Amount of Each Disbursement this Period

257.39

**[MEMO ITEM]****SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

623.74

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
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(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. Staples**

Mailing Address 500 Staples Drive

City	State	Zip Code
Framingham	MA	01702

Purpose of Disbursement  
Pens, Staples, Clipboards & Cleaning Supplies

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		29		2014

**Transaction ID : D415578**

Amount of Each Disbursement this Period

366.35
--------

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B. American Express**

Mailing Address P.O. Box 1270

City	State	Zip Code
Newark	NJ	07101-1270

Purpose of Disbursement  
Credit Card Payment-see below

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		22		2014

**Transaction ID : D415976**

Amount of Each Disbursement this Period

17244.38
----------

Full Name (Last, First, Middle Initial)

**C. Amtrak**

Mailing Address 50 Massachusetts Ave NE

City	State	Zip Code
Washington	DC	20002

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		22		2014

**Transaction ID : D415982**

Amount of Each Disbursement this Period

45.00
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**[MEMO ITEM]****SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

17244.38
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
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☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. SVM, LP**

Mailing Address 200 E. Howard Avenue, Suite 220

City Des Plaines      State IL      Zip Code 60018

Purpose of Disbursement  
Gas Cards

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State:      District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09      22      2014
**Transaction ID : D415977**

Amount of Each Disbursement this Period

8622.04

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B. SVM, LP**

Mailing Address 200 E. Howard Avenue, Suite 220

City Des Plaines      State IL      Zip Code 60018

Purpose of Disbursement  
Gas Cards

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State:      District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09      22      2014
**Transaction ID : D415978**

Amount of Each Disbursement this Period

1954.26

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. SVM, LP**

Mailing Address 200 E. Howard Avenue, Suite 220

City Des Plaines      State IL      Zip Code 60018

Purpose of Disbursement  
Gas Cards

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State:      District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09      22      2014
**Transaction ID : D415979**

Amount of Each Disbursement this Period

1107.28

**[MEMO ITEM]****SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00



<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

New York State Democratic Committee

Three digital displays showing the date 09/09/2014 in MM/DD/YYYY format. The first display shows '09' for the month, the second shows '09' for the day, and the third shows '2014' for the year. Each display has a small indicator above it: 'M' for month, 'D' for day, and 'Y' for year.

2059.26

State:  District:

Three digital displays are shown, each with a different set of missing segments. The first display shows '09' with missing segments for the top-left, top-middle, and top-right. The second display shows '09' with missing segments for the top-left, top-middle, and top-right. The third display shows '2014' with missing segments for the top-left, top-middle, top-right, and bottom-left.

21.88

State:  District:

40.12

State:  District:

2059.26

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

New York State Democratic Committee

Response	Percentage
U.S. should take more action to reduce global warming	32.09

**[MEMO ITEM]**

MM / DD / YYYY

Age Group	Percentage
18-24	16.91
25-34	16.91
35-44	16.91
45-54	16.91
55-64	16.91
65-74	16.91
75-84	16.91
85+	16.91

**[MEMO ITEM]**

4.30

**[MEMO ITEM]**

0.00

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

New York State Democratic Committee

### A. National Grid

Category/  
Type

78.47

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State:	District:		

### B. RadioShack

MM / DD / YYYY

Category/  
Type

30.16

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For:
State:	District:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

### C. Staples

The image shows three separate boxes, each representing a part of a date. The first box contains the letters 'M' and 'M' with the number '09' below them. The second box contains the letters 'D' and 'D' with the number '09' below them. The third box contains the letters 'Y' and 'Y' with the number '2014' below them. The boxes are arranged horizontally and separated by slashes, forming the date 09/09/2014.

Category/  
Type

66.80

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State:	District:		

0.00

\_\_\_\_\_

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 107 OF 224

☒ 21b   ☐ 22   ☐ 23   ☐ 24   ☐ 25   ☐ 26  
☐ 27   ☐ 28a   ☐ 28b   ☐ 28c   ☐ 29   ☐ 30b

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NAME OF COMMITTEE (In Full)

**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. Staples**

Mailing Address 1283 Arsenal Street

City Watertown      State NY      Zip Code 13601

Purpose of Disbursement  
Markers, Hooks & Duct Tape

Candidate Name

Office Sought:   ☐ House  
                          ☐ Senate  
                          ☐ President

State:      District:

Disbursement For:  
☐ Primary      ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 09 / 2014
**Transaction ID : D415996**

Amount of Each Disbursement this Period

70.85

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B. Staples**

Mailing Address 77 Consumer Square

City Plattsburgh      State NY      Zip Code 12901

Purpose of Disbursement  
Wireless Router, Printer Ink & Cords

Candidate Name

Office Sought:   ☐ House  
                          ☐ Senate  
                          ☐ President

State:      District:

Disbursement For:  
☐ Primary      ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 09 / 2014
**Transaction ID : D415999**

Amount of Each Disbursement this Period

314.71

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. Target**

Mailing Address 3031 Route 50

City Saratoga Springs      State NY      Zip Code 12866

Purpose of Disbursement  
Cleaning Supplies

Candidate Name

Office Sought:   ☐ House  
                          ☐ Senate  
                          ☐ President

State:      District:

Disbursement For:  
☐ Primary      ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 09 / 2014
**Transaction ID : D416010**

Amount of Each Disbursement this Period

10.62

**[MEMO ITEM]****SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 108 OF 224

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A. Target**

Mailing Address 578 Aviation Rd Ste 1S

City	State	Zip Code
Queensbury	NY	12804

Purpose of Disbursement  
Trash Can, Extension Cords & Letter Trays

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		09		2014

Transaction ID : D416015

Amount of Each Disbursement this Period

88.51
-------

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. Target**

Mailing Address 60 Smithfield Blvd.

City	State	Zip Code
Plattsburgh	NY	12901

Purpose of Disbursement  
Printer Ink, Hooks & Dry Erase

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		09		2014

Transaction ID : D416020

Amount of Each Disbursement this Period

47.27
-------

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. Time Warner Cable**

Mailing Address P.O. Box 70872

City	State	Zip Code
Charlotte	NC	28272-0872

Purpose of Disbursement  
Internet

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		09		2014

Transaction ID : D416037

Amount of Each Disbursement this Period

374.88
--------

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.00
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 110 OF 224

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A. Best Buy**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		23		2014

Mailing Address 21089 Salmon Run Mall Loop E

City	State	Zip Code
Watertown	NY	13601

Purpose of Disbursement  
Printer Ink Cartridges

Candidate Name

Category/  
Type

Transaction ID : D416075

Amount of Each Disbursement this Period

26.61
-------

[MEMO ITEM]

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

**B. City of Glens Falls City Clerk**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		23		2014

Mailing Address 42 Ridge St

City	State	Zip Code
Glens Falls	NY	12801

Purpose of Disbursement  
Parking Permits

Candidate Name

Category/  
Type

Transaction ID : D416078

Amount of Each Disbursement this Period

192.00
--------

[MEMO ITEM]

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

**C. Hometown Smoothies and Eatery**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		23		2014

Mailing Address 14 Ridge St

City	State	Zip Code
Glens Falls	NY	12801

Purpose of Disbursement  
Food

Candidate Name

Category/  
Type

Transaction ID : D416073

Amount of Each Disbursement this Period

150.00
--------

[MEMO ITEM]

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.00
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 111 OF 224

☒ 21b   ☐ 22   ☐ 23   ☐ 24   ☐ 25   ☐ 26  
☐ 27   ☐ 28a   ☐ 28b   ☐ 28c   ☐ 29   ☐ 30b

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NAME OF COMMITTEE (In Full)

**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. National Grid**

Mailing Address PO Box 11742

City

Newark

State

NJ

Zip Code

07101-4742

Purpose of Disbursement

Utilities

Candidate Name

Category/  
Type

Office Sought:

☐

House

☐

Senate

☐

President

Disbursement For:

☐

Primary

☐

General

☐

Other (specify) ▼

State:

District:

Date of Disbursement

M M M /  
09D D D /  
23Y Y Y Y Y Y  
2014**Transaction ID : D416070**

Amount of Each Disbursement this Period

119.53

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B. Staples**

Mailing Address 77 Consumer Square

City

Plattsburgh

State

NY

Zip Code

12901

Purpose of Disbursement

Easel, Sharpies &amp; Paper

Candidate Name

Category/  
Type

Office Sought:

☐

House

☐

Senate

☐

President

Disbursement For:

☐

Primary

☐

General

☐

Other (specify) ▼

State:

District:

Date of Disbursement

M M M /  
09D D D /  
23Y Y Y Y Y Y  
2014**Transaction ID : D416065**

Amount of Each Disbursement this Period

77.19

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. Staples**

Mailing Address 1283 Arsenal Street

City

Watertown

State

NY

Zip Code

13601

Purpose of Disbursement

Printer Ink Cartridges

Candidate Name

Category/  
Type

Office Sought:

☐

House

☐

Senate

☐

President

Disbursement For:

☐

Primary

☐

General

☐

Other (specify) ▼

State:

District:

Date of Disbursement

M M M /  
09D D D /  
23Y Y Y Y Y Y  
2014**Transaction ID : D416067**

Amount of Each Disbursement this Period

158.87

**[MEMO ITEM]****SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

New York State Democratic Committee

### A. The Bicknell Corporation

Mailing Address PO Box 5110

City	State	Zip Code
Potsdam	NY	13676

### Purpose of Disbursement Printer Ink Cartridges

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

Transaction ID : D416076

Amount of Each Disbursement this Period

32.29

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

### B. Time Warner Cable

Mailing Address P.O. Box 70872

City	State	Zip Code
Charlotte	NC	28272-0872

Purpose of Disbursement	Internet

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

09 / 23 / 2014

Transaction ID : D416071

Amount of Each Disbursement this Period

299.88

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

### C. Verizon Wireless

Mailing Address P.O. Box 408

City	State	Zip Code
Newark	NJ	07101-0408

Purpose of Disbursement	Internet

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y  
09 23 2014

Transaction ID : D416068

Amount of Each Disbursement this Period

240.08

**[MEMO ITEM]**

**SUBTOTAL** of Disbursements This Page (optional).....

**TOTAL** This Period (last page this line number only).....

0.00

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

New York State Democratic Committee

#### A. Westelcom Network Inc

City	State	Zip Code
Westport	NY	12993

662.99

Category/  
Type

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

MM / DD / YYYY

### B. Adin Lenchner

Mailing Address 109 New Dorp Plaza

City	State	Zip Code
Staten Island	NY	10306

Transaction ID : D416346

Purpose of Disbursement
Expense Reimbursements-see below

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:  District:

Full Name (Last, First, Middle Initial)

Date of Disbursement

### C. Ikea

Mailing Address 420 Alan Wood Rd.

The image shows three separate boxes, each representing a part of a date. The first box contains the letters 'M' and 'M' with the number '09' below them. The second box contains the letters 'D' and 'D' with the number '09' below them. The third box contains the letters 'Y' and 'Y' with the number '2014' below them. The boxes are arranged horizontally and separated by slashes, forming the date 09/09/2014.

City	State	Zip Code
Conshohocken	PA	19428

Transaction ID : D416348

Purpose of Disbursement	
Office Chairs	


Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

**[MEMO ITEM]**

State:  District:

**SUBTOTAL** of Disbursements This Page (optional).....

255.18

**TOTAL** This Period (last page this line number only).....

63606.17

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 114 OF 224

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A. Jon Stryker**

Mailing Address 450 W 14th St, 9th Fl

City	State	Zip Code
New York	NY	10014

Purpose of Disbursement  
Excessive Contribution

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼
Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2014

Transaction ID : D414272

Amount of Each Disbursement this Period

5200.00
---------

**B.**

Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼
Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
-------	---	-------	---	-------------

Amount of Each Disbursement this Period

--

**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼
Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
-------	---	-------	---	-------------

Amount of Each Disbursement this Period

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SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

5200.00
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5200.00
---------

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 115 OF 224

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. Michael Actis-Grande**

Mailing Address 9 Rockledge Dr

City	State	Zip Code
Brewster	NY	10509

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	10	/	2014

**Transaction ID : D411294**

Amount of Each Disbursement this Period

903.25
--------

Full Name (Last, First, Middle Initial)

**B. Michael Actis-Grande**

Mailing Address 9 Rockledge Dr

City	State	Zip Code
Brewster	NY	10509

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	24	/	2014

**Transaction ID : D411477**

Amount of Each Disbursement this Period

903.25
--------

Full Name (Last, First, Middle Initial)

**C. Garang A Ajak**

Mailing Address 110 Edgewood Ave

City	State	Zip Code
Syracuse	NY	13207

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	24	/	2014

**Transaction ID : D411478**

Amount of Each Disbursement this Period

877.98
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**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2684.48
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 116 OF 224

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. Garang A Ajak**

Mailing Address 110 Edgewood Ave

City Syracuse	State NY	Zip Code 13207
------------------	-------------	-------------------

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		10		2014

**Transaction ID : D411295**

Amount of Each Disbursement this Period

877.98
--------

Full Name (Last, First, Middle Initial)

**B. Christopher T Alexander**

Mailing Address 104-29 - 205 Place

City Queens	State NY	Zip Code 11412
----------------	-------------	-------------------

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		10		2014

**Transaction ID : D411296**

Amount of Each Disbursement this Period

1696.79
---------

Full Name (Last, First, Middle Initial)

**C. Christopher T Alexander**

Mailing Address 104-29 - 205 Place

City Queens	State NY	Zip Code 11412
----------------	-------------	-------------------

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		24		2014

**Transaction ID : D411479**

Amount of Each Disbursement this Period

1696.80
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**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

4271.57

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. Robert T Barber**

Mailing Address 24 Pierrepont Avenue

City	State	Zip Code
Potsdam	NY	13676

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		24		2014

**Transaction ID : D411480**

Amount of Each Disbursement this Period

903.26
--------

Full Name (Last, First, Middle Initial)

**B. Robert T Barber**

Mailing Address 24 Pierrepont Avenue

City	State	Zip Code
Potsdam	NY	13676

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		10		2014

**Transaction ID : D411297**

Amount of Each Disbursement this Period

903.25
--------

Full Name (Last, First, Middle Initial)

**C. Amoy K Barnes**

Mailing Address 372 Cary Ave

City	State	Zip Code
Staten Island	NY	10310

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		10		2014

**Transaction ID : D411298**

Amount of Each Disbursement this Period

1066.86
---------

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2873.37

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 118 OF 224

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. Amoy K Barnes**

Mailing Address 372 Cary Ave

City	State	Zip Code
Staten Island	NY	10310

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		24		2014

**Transaction ID : D411481**

Amount of Each Disbursement this Period

1066.86
---------

Full Name (Last, First, Middle Initial)

**B. Jonas A Batcheller**

Mailing Address 1005 Bay Avenue

City	State	Zip Code
Mattituck	NY	11952

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		24		2014

**Transaction ID : D411482**

Amount of Each Disbursement this Period

1041.59
---------

Full Name (Last, First, Middle Initial)

**C. Jonas A Batcheller**

Mailing Address 1005 Bay Avenue

City	State	Zip Code
Mattituck	NY	11952

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		10		2014

**Transaction ID : D411299**

Amount of Each Disbursement this Period

1041.59
---------

**SUBTOTAL** of Disbursements This Page (optional)..... ►

3150.04
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**TOTAL** This Period (last page this line number only)..... ►

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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 119 OF 224

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. Benjamin T Bills**

Mailing Address 7331 Eelpot Road

City	State	Zip Code
Naples	NY	14512

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		10		2014

**Transaction ID : D411300**

Amount of Each Disbursement this Period

1066.88
---------

Full Name (Last, First, Middle Initial)

**B. Benjamin T Bills**

Mailing Address 7331 Eelpot Road

City	State	Zip Code
Naples	NY	14512

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		24		2014

**Transaction ID : D411483**

Amount of Each Disbursement this Period

1066.86
---------

Full Name (Last, First, Middle Initial)

**C. John B Black**

Mailing Address 7 Crescent St

City	State	Zip Code
Coram	NY	11727

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		24		2014

**Transaction ID : D411484**

Amount of Each Disbursement this Period

763.62
--------

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2897.36
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. John B Black**

Mailing Address 7 Crescent St

City	State	Zip Code
Coram	NY	11727

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	10	/	2014

**Transaction ID : D411301**

Amount of Each Disbursement this Period

763.64
--------

Full Name (Last, First, Middle Initial)

**B. Benjamin N Bogard**

Mailing Address 8 Saratoga St

City	State	Zip Code
Lido Beach	NY	11561

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	24	/	2014

**Transaction ID : D411485**

Amount of Each Disbursement this Period

785.68
--------

Full Name (Last, First, Middle Initial)

**C. Brandon M Buda**

Mailing Address 8230 Fuchsia Path

City	State	Zip Code
Clay	NY	13041

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	24	/	2014

**Transaction ID : D411486**

Amount of Each Disbursement this Period

928.51
--------

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2477.83
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 121 OF 224

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. Brandon M Buda**

Mailing Address 8230 Fuchsia Path

City	State	Zip Code
Clay	NY	13041

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		10		2014

**Transaction ID : D411302**

Amount of Each Disbursement this Period

928.51
--------

Full Name (Last, First, Middle Initial)

**B. Eva M Carafa**

Mailing Address 527 Allen St

City	State	Zip Code
Syracuse	NY	13210

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		10		2014

**Transaction ID : D411303**

Amount of Each Disbursement this Period

1009.13
---------

Full Name (Last, First, Middle Initial)

**C. Eva M Carafa**

Mailing Address 527 Allen St

City	State	Zip Code
Syracuse	NY	13210

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		24		2014

**Transaction ID : D411487**

Amount of Each Disbursement this Period

1009.13
---------

**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

2946.77
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 122 OF 224

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. Thomas F Casale**

Mailing Address 9 South Comrie Ave

City	State	Zip Code
Johnstown	NY	12095

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	24	/	2014

**Transaction ID : D411488**

Amount of Each Disbursement this Period

932.45
--------

Full Name (Last, First, Middle Initial)

**B. Jack Chernak**

Mailing Address 220 Osgood Ave Apt 4P

City	State	Zip Code
Staten Island	NY	10304

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	24	/	2014

**Transaction ID : D411489**

Amount of Each Disbursement this Period

1084.59
---------

Full Name (Last, First, Middle Initial)

**C. Jack Chernak**

Mailing Address 220 Osgood Ave Apt 4P

City	State	Zip Code
Staten Island	NY	10304

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	10	/	2014

**Transaction ID : D411304**

Amount of Each Disbursement this Period

1084.59
---------

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3101.63
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 123 OF 224

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A. Augusta Y Christensen**

Mailing Address 210 W State St Apt 3

City	State	Zip Code
Ithaca	NY	14850

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		10		2014

Transaction ID : D411305

Amount of Each Disbursement this Period

1255.75
---------

Full Name (Last, First, Middle Initial)

**B. Augusta Y Christensen**

Mailing Address 210 W State St Apt 3

City	State	Zip Code
Ithaca	NY	14850

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		24		2014

Transaction ID : D411490

Amount of Each Disbursement this Period

1255.73
---------

Full Name (Last, First, Middle Initial)

**C. Gregory W Coffey**

Mailing Address 1185 Hope Street

City	State	Zip Code
Stamford	CT	06907

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		24		2014

Transaction ID : D411491

Amount of Each Disbursement this Period

903.25
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SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

3414.73
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# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 124 OF 224

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. Gregory W Coffey**

Mailing Address 1185 Hope Street

City State Zip Code  
 Stamford CT 06907

Purpose of Disbursement  
 Wages

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
 09 10 2014

**Transaction ID : D411306**

Amount of Each Disbursement this Period

903.25

Full Name (Last, First, Middle Initial)

**B. Gregory W Coffey**

Mailing Address 1185 Hope Street

City State Zip Code  
 Stamford CT 06907

Purpose of Disbursement  
 Wages

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
 09 29 2014

**Transaction ID : D415580**

Amount of Each Disbursement this Period

903.25

Full Name (Last, First, Middle Initial)

**C. Kristen M Connolly**

Mailing Address 5 Norway Pine Dr

City State Zip Code  
 Medford NY 11763

Purpose of Disbursement  
 Wages

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
 09 24 2014

**Transaction ID : D411492**

Amount of Each Disbursement this Period

499.99

**SUBTOTAL** of Disbursements This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

2306.49

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 125 OF 224

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. Sara M Cooper**

Mailing Address 1915 Evva Drive

City	State	Zip Code
Schenectady	NY	12303

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		24		2014

**Transaction ID : D411493**

Amount of Each Disbursement this Period

903.25
--------

Full Name (Last, First, Middle Initial)

**B. Sara M Cooper**

Mailing Address 1915 Evva Drive

City	State	Zip Code
Schenectady	NY	12303

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		10		2014

**Transaction ID : D411307**

Amount of Each Disbursement this Period

903.24
--------

Full Name (Last, First, Middle Initial)

**C. Vladimir Cruz**

Mailing Address 1264 Rev James Apolite Ave

City	State	Zip Code
Bronx	NY	10459

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		10		2014

**Transaction ID : D411308**

Amount of Each Disbursement this Period

1057.82
---------

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2864.31

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. Vladimir Cruz**

Mailing Address 1264 Rev James Apolite Ave

City	State	Zip Code
Bronx	NY	10459

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		24		2014

**Transaction ID : D411494**

Amount of Each Disbursement this Period

1057.82
---------

Full Name (Last, First, Middle Initial)

**B. Ian F Davis**

Mailing Address 105 Stethem Dr

City	State	Zip Code
Centereach	NY	11720

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		24		2014

**Transaction ID : D411495**

Amount of Each Disbursement this Period

713.51
--------

Full Name (Last, First, Middle Initial)

**C. Ian F Davis**

Mailing Address 105 Stethem Dr

City	State	Zip Code
Centereach	NY	11720

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		10		2014

**Transaction ID : D411309**

Amount of Each Disbursement this Period

713.52
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**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2484.85

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. Michael R Debaise**

Mailing Address 1512 Park St

City Syracuse	State NY	Zip Code 13208
------------------	-------------	-------------------

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		10		2014

**Transaction ID : D411310**

Amount of Each Disbursement this Period

928.51
--------

Full Name (Last, First, Middle Initial)

**B. Michael R Debaise**

Mailing Address 1512 Park St

City Syracuse	State NY	Zip Code 13208
------------------	-------------	-------------------

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		24		2014

**Transaction ID : D411496**

Amount of Each Disbursement this Period

928.51
--------

Full Name (Last, First, Middle Initial)

**C. Adam N Diamond**

Mailing Address 1141 E 73rd St

City Brooklyn	State NY	Zip Code 11234
------------------	-------------	-------------------

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		24		2014

**Transaction ID : D411497**

Amount of Each Disbursement this Period

1031.05
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**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2888.07
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. Adam N Diamond**

Mailing Address 1141 E 73rd St

City	State	Zip Code
Brooklyn	NY	11234

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		10		2014

**Transaction ID : D411311**

Amount of Each Disbursement this Period

1031.05
---------

Full Name (Last, First, Middle Initial)

**B. Chelsea M Dietlin**

Mailing Address 340 Third St Apt 207

City	State	Zip Code
Jersey City	NJ	07302

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		10		2014

**Transaction ID : D411312**

Amount of Each Disbursement this Period

1230.47
---------

Full Name (Last, First, Middle Initial)

**C. Chelsea M Dietlin**

Mailing Address 340 Third St Apt 207

City	State	Zip Code
Jersey City	NJ	07302

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		24		2014

**Transaction ID : D411498**

Amount of Each Disbursement this Period

1230.47
---------

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3491.99
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. Melanie N DiPalma**

Mailing Address 55 Sarah Drive

City	State	Zip Code
Lake Grove	NY	11755

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		10		2014

**Transaction ID : D411313**

Amount of Each Disbursement this Period

60.55
-------

Full Name (Last, First, Middle Initial)

**B. Anna C Dore**

Mailing Address 4321 Ashby Avenue

City	State	Zip Code
Des Moines	IA	50310

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		10		2014

**Transaction ID : D411314**

Amount of Each Disbursement this Period

1041.61
---------

Full Name (Last, First, Middle Initial)

**C. Anna C Dore**

Mailing Address 4321 Ashby Avenue

City	State	Zip Code
Des Moines	IA	50310

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		24		2014

**Transaction ID : D411499**

Amount of Each Disbursement this Period

1041.59
---------

**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

2143.75

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. Adam R Dweck**

Mailing Address 3566 Bedford Avenue

City	State	Zip Code
Brooklyn	NY	11210

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		24		2014

**Transaction ID : D411500**

Amount of Each Disbursement this Period

1031.05
---------

Full Name (Last, First, Middle Initial)

**B. Adam R Dweck**

Mailing Address 3566 Bedford Avenue

City	State	Zip Code
Brooklyn	NY	11210

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		10		2014

**Transaction ID : D411315**

Amount of Each Disbursement this Period

1031.05
---------

Full Name (Last, First, Middle Initial)

**C. Alexander I Edelman**

Mailing Address 100 St Marks Place #14

City	State	Zip Code
New York	NY	10009

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		24		2014

**Transaction ID : D411501**

Amount of Each Disbursement this Period

1031.80
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**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3093.90
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 131 OF 224

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A. Cathelyne Etienne**

Mailing Address 76 Shirley Lane

City	State	Zip Code
Medford	NY	11763

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		10		2014

Transaction ID : D411316

Amount of Each Disbursement this Period

293.64
--------

Full Name (Last, First, Middle Initial)

**B. Luke D Evans**

Mailing Address 18174 Bast Road

City	State	Zip Code
Watertown	NY	13601

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		10		2014

Transaction ID : D411317

Amount of Each Disbursement this Period

877.98
--------

Full Name (Last, First, Middle Initial)

**C. Luke D Evans**

Mailing Address 18174 Bast Road

City	State	Zip Code
Watertown	NY	13601

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		24		2014

Transaction ID : D411502

Amount of Each Disbursement this Period

877.98
--------

SUBTOTAL of Disbursements This Page (optional).....▶

2049.60
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TOTAL This Period (last page this line number only).....▶

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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 132 OF 224

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. Thomas F Fargardo**

Mailing Address 612 Centre Ave

City	State	Zip Code
Lindenhurst	NY	11757

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		24		2014

**Transaction ID : D411503**

Amount of Each Disbursement this Period

713.52
--------

Full Name (Last, First, Middle Initial)

**B. Thomas F Fargardo**

Mailing Address 612 Centre Ave

City	State	Zip Code
Lindenhurst	NY	11757

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		10		2014

**Transaction ID : D411318**

Amount of Each Disbursement this Period

713.51
--------

Full Name (Last, First, Middle Initial)

**C. John C Farrell**

Mailing Address 26 Commodore Circle

City	State	Zip Code
Port Jefferson Station	NY	11776

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		10		2014

**Transaction ID : D411319**

Amount of Each Disbursement this Period

1041.59
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**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2468.62

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. John C Farrell**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		24		2014

Mailing Address 26 Commodore Circle

City	State	Zip Code
Port Jefferson Station	NY	11776

**Transaction ID : D411504**Purpose of Disbursement  
Wages

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

1041.59

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Full Name (Last, First, Middle Initial)

**B. Sean P Finn**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		24		2014

Mailing Address 20 Songsparrow Lane

City	State	Zip Code
Centereach	NY	11720

**Transaction ID : D411505**Purpose of Disbursement  
Wages

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

1041.59

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Full Name (Last, First, Middle Initial)

**C. Sean P Finn**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		10		2014

Mailing Address 20 Songsparrow Lane

City	State	Zip Code
Centereach	NY	11720

**Transaction ID : D411320**Purpose of Disbursement  
Wages

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

1041.60

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

3124.78

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 134 OF 224

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. Jared Fishedick**

Mailing Address 1374 Broadway Avenue

City	State	Zip Code
Holbrook	NY	11741

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	10	/	2014

**Transaction ID : D411321**

Amount of Each Disbursement this Period

1255.74
---------

Full Name (Last, First, Middle Initial)

**B. Jared Fishedick**

Mailing Address 1374 Broadway Avenue

City	State	Zip Code
Holbrook	NY	11741

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	24	/	2014

**Transaction ID : D411506**

Amount of Each Disbursement this Period

1255.75
---------

Full Name (Last, First, Middle Initial)

**C. Jenny L Fischman**

Mailing Address 81 Oakdale Street

City	State	Zip Code
Staten Island	NY	10308

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	24	/	2014

**Transaction ID : D411507**

Amount of Each Disbursement this Period

1031.05
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**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3542.54
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# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 135 OF 224

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)

**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. Jenny L Fischman**

Mailing Address 81 Oakdale Street

City Staten Island State NY Zip Code 10308

Purpose of Disbursement  
Wages

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 10 / 2014

**Transaction ID : D411322**

Amount of Each Disbursement this Period

1031.06

Full Name (Last, First, Middle Initial)

**B. Sarah E Fonts**

Mailing Address 33 Carroll St

City Poughkeepsie State NY Zip Code 12601

Purpose of Disbursement  
Wages

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 24 / 2014

**Transaction ID : D411508**

Amount of Each Disbursement this Period

227.13

Full Name (Last, First, Middle Initial)

**C. Randall J Franklin**

Mailing Address 198 Peconic Ave

City Medford State NY Zip Code 11763

Purpose of Disbursement  
Wages & Gas Stipend

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 24 / 2014

**Transaction ID : D411509**

Amount of Each Disbursement this Period

1216.86

**SUBTOTAL** of Disbursements This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

2475.05

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. Randall J Franklin**

Mailing Address 198 Peconic Ave

City	State	Zip Code
Medford	NY	11763

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		10		2014

**Transaction ID : D411323**

Amount of Each Disbursement this Period

1066.87
---------

Full Name (Last, First, Middle Initial)

**B. Leif L Frymire**

Mailing Address 1283 Bear Creek Rd

City	State	Zip Code
Woodgate	NY	13494

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		10		2014

**Transaction ID : D411324**

Amount of Each Disbursement this Period

903.25
--------

Full Name (Last, First, Middle Initial)

**C. Leif L Frymire**

Mailing Address 1283 Bear Creek Rd

City	State	Zip Code
Woodgate	NY	13494

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		24		2014

**Transaction ID : D411510**

Amount of Each Disbursement this Period

903.25
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**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2873.37
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. Michael E Gagen Jr**

Mailing Address 2755 Westphalia Rd

City	State	Zip Code
Mattituck	NY	11952

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	24	/	2014

**Transaction ID : D411511**

Amount of Each Disbursement this Period

1063.79
---------

Full Name (Last, First, Middle Initial)

**B. Michael E Gagen Jr**

Mailing Address 2755 Westphalia Rd

City	State	Zip Code
Mattituck	NY	11952

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	10	/	2014

**Transaction ID : D411391**

Amount of Each Disbursement this Period

513.94
--------

Full Name (Last, First, Middle Initial)

**C. John C Gallagher**

Mailing Address 4841 Willett Parkway

City	State	Zip Code
Chevy Chase	MD	20815

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	24	/	2014

**Transaction ID : D411512**

Amount of Each Disbursement this Period

1111.71
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**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2689.44
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<input type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input checked="" type="checkbox"/>	30b

New York State Democratic Committee

1861.79

Category/  
Type

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

09 / 10 / 2014

Age Group	Percentage
18-24	1861.79
25-34	
35-44	
45-54	
55-64	
65-74	
75-84	
85+	

Category/  
Type

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

1241.99

Category/  
Type

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

4965.57

**TOTAL** This Period (last page this line number only).....

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. Scott T Genzink**

Mailing Address 377 Crescent Ave

City Wyckoff	State NJ	Zip Code 07481
-----------------	-------------	-------------------

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		24		2014

**Transaction ID : D411515**

Amount of Each Disbursement this Period

1194.25
---------

Full Name (Last, First, Middle Initial)

**B. Scott T Genzink**

Mailing Address 377 Crescent Ave

City Wyckoff	State NJ	Zip Code 07481
-----------------	-------------	-------------------

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		10		2014

**Transaction ID : D411393**

Amount of Each Disbursement this Period

1194.25
---------

Full Name (Last, First, Middle Initial)

**C. Gerasimos J Georgatos**

Mailing Address 4014 Holly Rd

City Seaford	State NY	Zip Code 11783
-----------------	-------------	-------------------

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		10		2014

**Transaction ID : D411394**

Amount of Each Disbursement this Period

1066.86
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**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3455.36
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. Gerasimos J Georgatos**

Mailing Address 4014 Holly Rd

City	State	Zip Code
Seaford	NY	11783

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		24		2014

**Transaction ID : D411516**

Amount of Each Disbursement this Period

1066.86
---------

Full Name (Last, First, Middle Initial)

**B. Aaron N Ghitelman**

Mailing Address 348 W 260th St

City	State	Zip Code
Bronx	NY	10471

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		24		2014

**Transaction ID : D411517**

Amount of Each Disbursement this Period

928.51
--------

Full Name (Last, First, Middle Initial)

**C. Aaron N Ghitelman**

Mailing Address 348 W 260th St

City	State	Zip Code
Bronx	NY	10471

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		10		2014

**Transaction ID : D411395**

Amount of Each Disbursement this Period

928.51
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**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2923.88
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. Marcia L Grippen**

Mailing Address 59 Lathrop Ave

City	State	Zip Code
Binghamton	NY	13905

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		10		2014

**Transaction ID : D411396**

Amount of Each Disbursement this Period

928.51
--------

Full Name (Last, First, Middle Initial)

**B. Marcia L Grippen**

Mailing Address 59 Lathrop Ave

City	State	Zip Code
Binghamton	NY	13905

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		24		2014

**Transaction ID : D411518**

Amount of Each Disbursement this Period

928.51
--------

Full Name (Last, First, Middle Initial)

**C. GRSC Consulting**

Mailing Address 2828 University Ave SE, Suite 150

City	State	Zip Code
Minneapolis	MN	55414

Purpose of Disbursement  
Field Operations Consulting

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		17		2014

**Transaction ID : D414249**

Amount of Each Disbursement this Period

110000.00
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**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

111857.02
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. Luke A Hamblen**

Mailing Address 3197 Baybrook Drive

City	State	Zip Code
Harrisonburg	VA	22801

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		24		2014

**Transaction ID : D411519**

Amount of Each Disbursement this Period

928.51
--------

Full Name (Last, First, Middle Initial)

**B. Luke A Hamblen**

Mailing Address 3197 Baybrook Drive

City	State	Zip Code
Harrisonburg	VA	22801

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		10		2014

**Transaction ID : D411397**

Amount of Each Disbursement this Period

928.51
--------

Full Name (Last, First, Middle Initial)

**C. Robert Haneman**

Mailing Address 47 Washington Avenue

City	State	Zip Code
Holtsville	NY	11742

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		10		2014

**Transaction ID : D411398**

Amount of Each Disbursement this Period

713.52
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**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

2570.54
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. Robert Haneman**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		24		2014

Mailing Address 47 Washington Avenue

City	State	Zip Code
Holtsville	NY	11742

**Transaction ID : D411520**Purpose of Disbursement  
Wages

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

713.51

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Full Name (Last, First, Middle Initial)

**B. Nancy A Hanna-Paquin**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		24		2014

Mailing Address 85377 Greig Street  
PO Box 157

City	State	Zip Code
Sodus Point	NY	14555

**Transaction ID : D411521**Purpose of Disbursement  
Wages

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

900.77

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Full Name (Last, First, Middle Initial)

**C. Nancy A Hanna-Paquin**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		10		2014

Mailing Address 85377 Greig Street  
PO Box 157

City	State	Zip Code
Sodus Point	NY	14555

**Transaction ID : D411399**Purpose of Disbursement  
Wages

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

485.81

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2100.09

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 144 OF 224

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. Reginald M Harris Jr**

Mailing Address 707 Indian Wells Court

City	State	Zip Code
Silver Spring	MD	20905

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		10		2014

**Transaction ID : D411400**

Amount of Each Disbursement this Period

1255.73
---------

Full Name (Last, First, Middle Initial)

**B. Reginald M Harris Jr**

Mailing Address 707 Indian Wells Court

City	State	Zip Code
Silver Spring	MD	20905

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		24		2014

**Transaction ID : D411522**

Amount of Each Disbursement this Period

1255.75
---------

Full Name (Last, First, Middle Initial)

**C. Jesse Hassinger**

Mailing Address 723 Colorado Avenue

City	State	Zip Code
Baltimore	MD	21210

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		24		2014

**Transaction ID : D411523**

Amount of Each Disbursement this Period

1696.79
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**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

4208.27
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 145 OF 224

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. Jesse Hassinger**

Mailing Address 723 Colorado Avenue

City	State	Zip Code
Baltimore	MD	21210

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		10		2014

**Transaction ID : D411401**

Amount of Each Disbursement this Period

1696.80
---------

Full Name (Last, First, Middle Initial)

**B. Jason R Henry**

Mailing Address 950 Brintell Street

City	State	Zip Code
Pittsburgh	PA	15201

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		10		2014

**Transaction ID : D411402**

Amount of Each Disbursement this Period

1696.79
---------

Full Name (Last, First, Middle Initial)

**C. Jason R Henry**

Mailing Address 950 Brintell Street

City	State	Zip Code
Pittsburgh	PA	15201

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		24		2014

**Transaction ID : D411524**

Amount of Each Disbursement this Period

1696.78
---------

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

5090.37
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. Richard J. Horner Jr.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		10		2014

Mailing Address 767 Mineral Springs Rd.

City	State	Zip Code
West Seneca	NY	14224

**Transaction ID : D414280**Purpose of Disbursement  
Wages

Amount of Each Disbursement this Period

Candidate Name

Category/ Type
-------------------

1790.33

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Full Name (Last, First, Middle Initial)

**B. Richard J. Horner Jr.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		24		2014

Mailing Address 767 Mineral Springs Rd.

City	State	Zip Code
West Seneca	NY	14224

**Transaction ID : D414295**Purpose of Disbursement  
Wages

Amount of Each Disbursement this Period

Candidate Name

Category/ Type
-------------------

1790.33

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Full Name (Last, First, Middle Initial)

**C. Flannery J Hourican**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		24		2014

Mailing Address 1841 Kirby Rd

City	State	Zip Code
Mc Lean	VA	22101

**Transaction ID : D411525**Purpose of Disbursement  
Wages

Amount of Each Disbursement this Period

Candidate Name

Category/ Type
-------------------

1066.86

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

4647.52

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. Flannery J Hourican**

Mailing Address 1841 Kirby Rd

City	State	Zip Code
Mc Lean	VA	22101

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		10		2014

**Transaction ID : D411403**

Amount of Each Disbursement this Period

1066.86
---------

Full Name (Last, First, Middle Initial)

**B. James A Hunt**

Mailing Address 14 Francis St

City	State	Zip Code
Wading River	NY	11792

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		10		2014

**Transaction ID : D411404**

Amount of Each Disbursement this Period

359.46
--------

Full Name (Last, First, Middle Initial)

**C. James A Hunt**

Mailing Address 14 Francis St

City	State	Zip Code
Wading River	NY	11792

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		24		2014

**Transaction ID : D411526**

Amount of Each Disbursement this Period

798.66
--------

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2224.98

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. Joshua S Hyman**

Mailing Address 45 Birch St Apt 16I

City Kingston	State NY	Zip Code 12401
------------------	-------------	-------------------

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		24		2014

**Transaction ID : D411527**

Amount of Each Disbursement this Period

1737.25
---------

Full Name (Last, First, Middle Initial)

**B. Joshua S Hyman**

Mailing Address 45 Birch St Apt 16I

City Kingston	State NY	Zip Code 12401
------------------	-------------	-------------------

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		10		2014

**Transaction ID : D411405**

Amount of Each Disbursement this Period

1737.25
---------

Full Name (Last, First, Middle Initial)

**C. Sarah E Jensen**

Mailing Address 656 Seville Ct

City Oconomowoc	State WI	Zip Code 53066
--------------------	-------------	-------------------

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		10		2014

**Transaction ID : D411406**

Amount of Each Disbursement this Period

928.51
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**SUBTOTAL** of Disbursements This Page (optional)..... ►

4403.01
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**TOTAL** This Period (last page this line number only)..... ►

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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. Sarah E Jensen**

Mailing Address 656 Seville Ct

City	State	Zip Code
Oconomowoc	WI	53066

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		24		2014

**Transaction ID : D411528**

Amount of Each Disbursement this Period

928.51
--------

Full Name (Last, First, Middle Initial)

**B. Michael B Jude**

Mailing Address 357 Little Clove Road

City	State	Zip Code
Staten Island	NY	10301

Purpose of Disbursement  
Wages & Gas Stipend

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		24		2014

**Transaction ID : D411529**

Amount of Each Disbursement this Period

1154.28
---------

Full Name (Last, First, Middle Initial)

**C. Michael B Jude**

Mailing Address 357 Little Clove Road

City	State	Zip Code
Staten Island	NY	10301

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		10		2014

**Transaction ID : D411407**

Amount of Each Disbursement this Period

1004.28
---------

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3087.07

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. Meghan B Kayser**

Mailing Address 1062 Van Hoesen Rd

City	State	Zip Code
Castleton	NY	12033

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		10		2014

**Transaction ID : D411408**

Amount of Each Disbursement this Period

901.35
--------

Full Name (Last, First, Middle Initial)

**B. Meghan B Kayser**

Mailing Address 1062 Van Hoesen Rd

City	State	Zip Code
Castleton	NY	12033

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		24		2014

**Transaction ID : D411530**

Amount of Each Disbursement this Period

1041.59
---------

Full Name (Last, First, Middle Initial)

**C. John P Kelly**

Mailing Address 76 Fonda Rd

City	State	Zip Code
Cohoes	NY	12047

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		24		2014

**Transaction ID : D411531**

Amount of Each Disbursement this Period

877.98
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**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2820.92
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. John P Kelly**

Mailing Address 76 Fonda Rd

City	State	Zip Code
Cohoes	NY	12047

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		10		2014

**Transaction ID : D411409**

Amount of Each Disbursement this Period

877.98
--------

Full Name (Last, First, Middle Initial)

**B. Leah R Kirk**

Mailing Address 229 Carlton Road

City	State	Zip Code
Bristol	TN	37620

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		10		2014

**Transaction ID : D411410**

Amount of Each Disbursement this Period

1230.48
---------

Full Name (Last, First, Middle Initial)

**C. Leah R Kirk**

Mailing Address 229 Carlton Road

City	State	Zip Code
Bristol	TN	37620

Purpose of Disbursement  
Wages & Health Insurance

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		24		2014

**Transaction ID : D411532**

Amount of Each Disbursement this Period

1436.16
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**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3544.62

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 152 OF 224

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. Corrine A Kleinman**

Mailing Address 1407 E Lafayette

City	State	Zip Code
Syracuse	NY	13210

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		24		2014

**Transaction ID : D411533**

Amount of Each Disbursement this Period

487.35
--------

Full Name (Last, First, Middle Initial)

**B. Ernest S Klepeis**

Mailing Address 55 River Road

City	State	Zip Code
New Paltz	NY	12561

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		24		2014

**Transaction ID : D411534**

Amount of Each Disbursement this Period

903.24
--------

Full Name (Last, First, Middle Initial)

**C. Ernest S Klepeis**

Mailing Address 55 River Road

City	State	Zip Code
New Paltz	NY	12561

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		10		2014

**Transaction ID : D411411**

Amount of Each Disbursement this Period

903.25
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**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2293.84
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. Russell Leibowitz**

Mailing Address 403 Mountain Ridge Drive

City	State	Zip Code
Mount Sinai	NY	11766

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		10		2014

**Transaction ID : D411412**

Amount of Each Disbursement this Period

1656.33
---------

Full Name (Last, First, Middle Initial)

**B. Russell Leibowitz**

Mailing Address 403 Mountain Ridge Drive

City	State	Zip Code
Mount Sinai	NY	11766

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		24		2014

**Transaction ID : D411535**

Amount of Each Disbursement this Period

1656.34
---------

Full Name (Last, First, Middle Initial)

**C. Adin Lenchner**

Mailing Address 800 Riverside Drive Apt Dup-E

City	State	Zip Code
New York	NY	10032

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		24		2014

**Transaction ID : D411536**

Amount of Each Disbursement this Period

1542.56
---------

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

4855.23
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. Adin Lenchner**

Mailing Address 800 Riverside Drive Apt Dup-E

City	State	Zip Code
New York	NY	10032

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	10	/	2014

**Transaction ID : D411413**

Amount of Each Disbursement this Period

1542.56
---------

Full Name (Last, First, Middle Initial)

**B. Andrew R Lewis**

Mailing Address 142 St James Street

City	State	Zip Code
Kingston	NY	12401

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	10	/	2014

**Transaction ID : D411414**

Amount of Each Disbursement this Period

572.23
--------

Full Name (Last, First, Middle Initial)

**C. Andrew R Lewis**

Mailing Address 142 St James Street

City	State	Zip Code
Kingston	NY	12401

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	24	/	2014

**Transaction ID : D411537**

Amount of Each Disbursement this Period

572.24
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**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2687.03
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. Owen G Lewis**

Mailing Address 336 Ivy Ave

City	State	Zip Code
Westbury	NY	11590

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		24		2014

**Transaction ID : D411538**

Amount of Each Disbursement this Period

713.52
--------

Full Name (Last, First, Middle Initial)

**B. Owen G Lewis**

Mailing Address 336 Ivy Ave

City	State	Zip Code
Westbury	NY	11590

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		10		2014

**Transaction ID : D411415**

Amount of Each Disbursement this Period

713.51
--------

Full Name (Last, First, Middle Initial)

**C. Patrick J Lewis**

Mailing Address 426 Guyon Ave

City	State	Zip Code
Staten Island	NY	10306

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		10		2014

**Transaction ID : D411416**

Amount of Each Disbursement this Period

1004.28
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**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

2431.31
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. Patrick J Lewis**

Mailing Address 426 Guyon Ave

City	State	Zip Code
Staten Island	NY	10306

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	24	/	2014

**Transaction ID : D411539**

Amount of Each Disbursement this Period

1004.28
---------

Full Name (Last, First, Middle Initial)

**B. Robin A Lewis**

Mailing Address 336 Ivy Avenue

City	State	Zip Code
Westbury	NY	11590

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	24	/	2014

**Transaction ID : D411540**

Amount of Each Disbursement this Period

763.64
--------

Full Name (Last, First, Middle Initial)

**C. Robin A Lewis**

Mailing Address 336 Ivy Avenue

City	State	Zip Code
Westbury	NY	11590

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	10	/	2014

**Transaction ID : D411417**

Amount of Each Disbursement this Period

763.63
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**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2531.55
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 157 OF 224

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. Jonathan E Lipe**

Mailing Address 6000 California Cir Apt 111

City	State	Zip Code
Rockville	MD	20852

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	10	/	2014

**Transaction ID : D411418**

Amount of Each Disbursement this Period

1146.59
---------

Full Name (Last, First, Middle Initial)

**B. Jonathan E Lipe**

Mailing Address 6000 California Cir Apt 111

City	State	Zip Code
Rockville	MD	20852

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	24	/	2014

**Transaction ID : D411541**

Amount of Each Disbursement this Period

1146.60
---------

Full Name (Last, First, Middle Initial)

**C. Jonathan E Lipe**

Mailing Address 6000 California Cir Apt 111

City	State	Zip Code
Rockville	MD	20852

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	29	/	2014

**Transaction ID : D415581**

Amount of Each Disbursement this Period

1146.59
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**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3439.78
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. Kimberley C Maier**

Mailing Address 40-A Alton Ave

City	State	Zip Code
Greenlawn	NY	11740

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		24		2014

**Transaction ID : D411542**

Amount of Each Disbursement this Period

1230.47
---------

Full Name (Last, First, Middle Initial)

**B. Kimberley C Maier**

Mailing Address 40-A Alton Ave

City	State	Zip Code
Greenlawn	NY	11740

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		10		2014

**Transaction ID : D411419**

Amount of Each Disbursement this Period

1230.47
---------

Full Name (Last, First, Middle Initial)

**C. Jesse E Manning**

Mailing Address 1665 East 31st Street

City	State	Zip Code
Brooklyn	NY	11234

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		10		2014

**Transaction ID : D411420**

Amount of Each Disbursement this Period

1004.28
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**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3465.22
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# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)

**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. Jesse E Manning**

Mailing Address 1665 East 31st Street

City State Zip Code  
 Brooklyn NY 11234

Purpose of Disbursement  
 Wages & Health Insurance

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y  
 09 24 2014

**Transaction ID : D411543**

Amount of Each Disbursement this Period

1498.79

Full Name (Last, First, Middle Initial)

**B. Maria C Martinez**

Mailing Address 73 Renwick St Apt 2

City State Zip Code  
 Newburgh NY 12550

Purpose of Disbursement  
 Wages

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y  
 09 24 2014

**Transaction ID : D411544**

Amount of Each Disbursement this Period

928.51

Full Name (Last, First, Middle Initial)

**C. Maria C Martinez**

Mailing Address 73 Renwick St Apt 2

City State Zip Code  
 Newburgh NY 12550

Purpose of Disbursement  
 Wages

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y  
 09 10 2014

**Transaction ID : D411421**

Amount of Each Disbursement this Period

928.51

**SUBTOTAL** of Disbursements This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

3355.81

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. Robert C McCracken**

Mailing Address 1051 NW 83rd Drive

City	State	Zip Code
Coral Springs	FL	33071

Purpose of Disbursement  
Wages & Health Insurance

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	10	/	2014

**Transaction ID : D411422**

Amount of Each Disbursement this Period

1608.25
---------

Full Name (Last, First, Middle Initial)

**B. Robert C McCracken**

Mailing Address 1051 NW 83rd Drive

City	State	Zip Code
Coral Springs	FL	33071

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	24	/	2014

**Transaction ID : D411545**

Amount of Each Disbursement this Period

1194.25
---------

Full Name (Last, First, Middle Initial)

**C. Amy M McDonald**

Mailing Address 234 E 25th St Apt 1

City	State	Zip Code
New York	NY	10010

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	24	/	2014

**Transaction ID : D411546**

Amount of Each Disbursement this Period

1057.82
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**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3860.32
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. Amy M McDonald**

Mailing Address 234 E 25th St Apt 1

City	State	Zip Code
New York	NY	10010

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		10		2014

**Transaction ID : D411423**

Amount of Each Disbursement this Period

1057.82
---------

Full Name (Last, First, Middle Initial)

**B. Alvin L McElveen**

Mailing Address 3320 7th St SE

City	State	Zip Code
Washington	DC	20032

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		10		2014

**Transaction ID : D411424**

Amount of Each Disbursement this Period

1092.13
---------

Full Name (Last, First, Middle Initial)

**C. Alvin L McElveen**

Mailing Address 3320 7th St SE

City	State	Zip Code
Washington	DC	20032

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		24		2014

**Transaction ID : D411547**

Amount of Each Disbursement this Period

1092.15
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**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

3242.10
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# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 162 OF 224

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)

**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. Kailey M McGarvey**

Mailing Address 27 Boat Lane

City Levittown State NY Zip Code 11756

Purpose of Disbursement  
Wages

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y  
09 24 2014

**Transaction ID : D411548**

Amount of Each Disbursement this Period

1066.87

Full Name (Last, First, Middle Initial)

**B. Kailey M McGarvey**

Mailing Address 27 Boat Lane

City Levittown State NY Zip Code 11756

Purpose of Disbursement  
Wages

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y  
09 10 2014

**Transaction ID : D411425**

Amount of Each Disbursement this Period

1066.86

Full Name (Last, First, Middle Initial)

**C. Melanie A McKeon**

Mailing Address 140 Austin Ave

City Staten Island State NY Zip Code 10306

Purpose of Disbursement  
Wages

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y  
09 10 2014

**Transaction ID : D411426**

Amount of Each Disbursement this Period

1041.61

**SUBTOTAL** of Disbursements This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

3175.34

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. Melanie A McKeon**

Mailing Address 140 Austin Ave

City	State	Zip Code
Staten Island	NY	10306

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		24		2014

**Transaction ID : D411549**

Amount of Each Disbursement this Period

1041.59
---------

Full Name (Last, First, Middle Initial)

**B. William G Melvin**

Mailing Address 4063 Rt 28A

City	State	Zip Code
West Shokan	NY	12494

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		24		2014

**Transaction ID : D411550**

Amount of Each Disbursement this Period

1066.86
---------

Full Name (Last, First, Middle Initial)

**C. William G Melvin**

Mailing Address 4063 Rt 28A

City	State	Zip Code
West Shokan	NY	12494

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		10		2014

**Transaction ID : D411427**

Amount of Each Disbursement this Period

1066.86
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**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3175.31
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. James N Meyer**

Mailing Address 612 Decker Rd

City Wallkill	State NY	Zip Code 12589
------------------	-------------	-------------------

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		10		2014

**Transaction ID : D411428**

Amount of Each Disbursement this Period

928.51
--------

Full Name (Last, First, Middle Initial)

**B. James N Meyer**

Mailing Address 612 Decker Rd

City Wallkill	State NY	Zip Code 12589
------------------	-------------	-------------------

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		24		2014

**Transaction ID : D411551**

Amount of Each Disbursement this Period

928.51
--------

Full Name (Last, First, Middle Initial)

**C. Cory J Miller**

Mailing Address 258 Montgomery St Floor 1

City Newburgh	State NY	Zip Code 12550
------------------	-------------	-------------------

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		24		2014

**Transaction ID : D412177**

Amount of Each Disbursement this Period

928.51
--------

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2785.53

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. Cory J Miller**

Mailing Address 258 Montgomery St Floor 1

City	State	Zip Code
Newburgh	NY	12550

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President
State:	District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		10		2014

**Transaction ID : D411429**

Amount of Each Disbursement this Period

928.51
--------

Full Name (Last, First, Middle Initial)

**B. Mission Control, Inc.**

Mailing Address 114 A Mansfield Hollow Rd.

City	State	Zip Code
Mansfield Center	CT	06250

Purpose of Disbursement  
Exempt Mail-Recchia

Candidate Name

**DOMENIC M JR RECCHIA**

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President
State: NY	District: 11

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		05		2014

**Transaction ID : D415594**

Amount of Each Disbursement this Period

22047.04
----------

Full Name (Last, First, Middle Initial)

**C. Mission Control, Inc.**

Mailing Address 114 A Mansfield Hollow Rd.

City	State	Zip Code
Mansfield Center	CT	06250

Purpose of Disbursement  
Slate Palm Card-Bishop

Candidate Name

**Timothy Bishop**

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President
State: NY	District: 01

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		09		2014

**Transaction ID : D415595**

Amount of Each Disbursement this Period

17800.00
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**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

40775.55
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. Mission Control, Inc.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		09		2014

Mailing Address 114 A Mansfield Hollow Rd.

City	State	Zip Code
Mansfield Center	CT	06250

**Transaction ID : D415596**Purpose of Disbursement  
Exempt Mail-Maloney

Amount of Each Disbursement this Period

Candidate Name

**SEAN PATRICK MALONEY**Category/  
Type

91297.20

Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: NY District: 18

Full Name (Last, First, Middle Initial)

**B. Mission Control, Inc.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		10		2014

Mailing Address 114 A Mansfield Hollow Rd.

City	State	Zip Code
Mansfield Center	CT	06250

**Transaction ID : D415613**Purpose of Disbursement  
Exempt Mail-Eldridge

Amount of Each Disbursement this Period

Candidate Name

**SEAN ELDRIDGE**Category/  
Type

27637.90

Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: NY District: 19

Full Name (Last, First, Middle Initial)

**C. Mission Control, Inc.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		10		2014

Mailing Address 114 A Mansfield Hollow Rd.

City	State	Zip Code
Mansfield Center	CT	06250

**Transaction ID : D415614**Purpose of Disbursement  
Exempt Mail-Recchia

Amount of Each Disbursement this Period

Candidate Name

**DOMENIC M JR RECCHIA**Category/  
Type

30528.84

Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: NY District: 11

**SUBTOTAL** of Disbursements This Page (optional)..... ►

149463.94

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. Mission Control, Inc.**

Mailing Address 114 A Mansfield Hollow Rd.

City	State	Zip Code
Mansfield Center	CT	06250

Purpose of Disbursement  
Exempt Mail-Maloney

Candidate Name

**SEAN PATRICK MALONEY**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: NY District: 18

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		10		2014

**Transaction ID : D415615**

Amount of Each Disbursement this Period

30209.40
----------

Full Name (Last, First, Middle Initial)

**B. Mission Control, Inc.**

Mailing Address 114 A Mansfield Hollow Rd.

City	State	Zip Code
Mansfield Center	CT	06250

Purpose of Disbursement  
Exempt Mail-Recchia

Candidate Name

**DOMENIC M JR RECCHIA**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: NY District: 11

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		11		2014

**Transaction ID : D415616**

Amount of Each Disbursement this Period

29953.36
----------

Full Name (Last, First, Middle Initial)

**C. Mission Control, Inc.**

Mailing Address 114 A Mansfield Hollow Rd.

City	State	Zip Code
Mansfield Center	CT	06250

Purpose of Disbursement  
Exempt Mail-Eldridge

Candidate Name

**SEAN ELDRIDGE**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: NY District: 19

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		17		2014

**Transaction ID : D415617**

Amount of Each Disbursement this Period

88547.95
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**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

148710.71
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. Mission Control, Inc.**

Mailing Address 114 A Mansfield Hollow Rd.

City	State	Zip Code
Mansfield Center	CT	06250

Purpose of Disbursement  
Exempt Mail-Recchia

Candidate Name

**DOMENIC M JR RECCHIA**Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: NY District: 11

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		17		2014

**Transaction ID : D415619**

Amount of Each Disbursement this Period

21928.72
----------

Full Name (Last, First, Middle Initial)

**B. Mission Control, Inc.**

Mailing Address 114 A Mansfield Hollow Rd.

City	State	Zip Code
Mansfield Center	CT	06250

Purpose of Disbursement  
Exempt Mail-Recchia

Candidate Name

**DOMENIC M JR RECCHIA**Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: NY District: 11

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		18		2014

**Transaction ID : D415620**

Amount of Each Disbursement this Period

22000.72
----------

Full Name (Last, First, Middle Initial)

**C. Mission Control, Inc.**

Mailing Address 114 A Mansfield Hollow Rd.

City	State	Zip Code
Mansfield Center	CT	06250

Purpose of Disbursement  
Exempt Mail-Maloney

Candidate Name

**SEAN PATRICK MALONEY**Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: NY District: 18

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		18		2014

**Transaction ID : D415621**

Amount of Each Disbursement this Period

29283.17
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**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

73212.61
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. Mission Control, Inc.**

Mailing Address 114 A Mansfield Hollow Rd.

City	State	Zip Code
Mansfield Center	CT	06250

Purpose of Disbursement  
Exempt Mail-Bishop

Candidate Name

**Timothy Bishop**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: NY District: 01

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		18		2014

**Transaction ID : D415622**

Amount of Each Disbursement this Period

142561.45
-----------

Full Name (Last, First, Middle Initial)

**B. Mission Control, Inc.**

Mailing Address 114 A Mansfield Hollow Rd.

City	State	Zip Code
Mansfield Center	CT	06250

Purpose of Disbursement  
Exempt Mail-Maloney

Candidate Name

**SEAN PATRICK MALONEY**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: NY District: 18

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		25		2014

**Transaction ID : D415630**

Amount of Each Disbursement this Period

29283.17
----------

Full Name (Last, First, Middle Initial)

**C. Mission Control, Inc.**

Mailing Address 114 A Mansfield Hollow Rd.

City	State	Zip Code
Mansfield Center	CT	06250

Purpose of Disbursement  
Exempt Mail-Recchia

Candidate Name

**DOMENIC M JR RECCHIA**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: NY District: 11

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		29		2014

**Transaction ID : D415632**

Amount of Each Disbursement this Period

23713.74
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**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

195558.36
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 170 OF 224

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. Mission Control, Inc.**

Mailing Address 114 A Mansfield Hollow Rd.

City	State	Zip Code
Mansfield Center	CT	06250

Purpose of Disbursement  
Exempt Mail-Bishop

Candidate Name

**Timothy Bishop**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: NY District: 01

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		29		2014

**Transaction ID : D415634**

Amount of Each Disbursement this Period

32051.47
----------

Full Name (Last, First, Middle Initial)

**B. Mission Control, Inc.**

Mailing Address 114 A Mansfield Hollow Rd.

City	State	Zip Code
Mansfield Center	CT	06250

Purpose of Disbursement  
Exempt Mail-Recchia

Candidate Name

**DOMENIC M JR RECCHIA**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: NY District: 11

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		29		2014

**Transaction ID : D415637**

Amount of Each Disbursement this Period

37018.66
----------

Full Name (Last, First, Middle Initial)

**C. Mission Control, Inc.**

Mailing Address 114 A Mansfield Hollow Rd.

City	State	Zip Code
Mansfield Center	CT	06250

Purpose of Disbursement  
Exempt Mail-Recchia

Candidate Name

**DOMENIC M JR RECCHIA**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: NY District: 11

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		04		2014

**Transaction ID : D415592**

Amount of Each Disbursement this Period

21850.72
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**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

90920.85
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. Mission Control, Inc.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		23		2014

Mailing Address 114 A Mansfield Hollow Rd.

City	State	Zip Code
Mansfield Center	CT	06250

**Transaction ID : D415625**Purpose of Disbursement  
Exempt Mail-Eldridge

Amount of Each Disbursement this Period

Candidate Name

**SEAN ELDRIDGE**Category/  
Type

33277.15

Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: NY District: 19

Full Name (Last, First, Middle Initial)

**B. Mission Control, Inc.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		24		2014

Mailing Address 114 A Mansfield Hollow Rd.

City	State	Zip Code
Mansfield Center	CT	06250

**Transaction ID : D415627**Purpose of Disbursement  
Exempt Mail-Recchia

Amount of Each Disbursement this Period

Candidate Name

**DOMENIC M JR RECCHIA**Category/  
Type

51289.74

Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: NY District: 11

Full Name (Last, First, Middle Initial)

**C. Ryan R Morden**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		24		2014

Mailing Address 705 Erie Ave

City	State	Zip Code
Takoma Park	MD	20912

**Transaction ID : D412178**Purpose of Disbursement  
Wages

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

667.80

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

85234.69

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)

**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. Logan W Murphy**

Mailing Address 169 Mayfield Drive

City State Zip Code  
Mastic Beach NY 11951

Purpose of Disbursement  
Wages

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 24 2014

**Transaction ID : D412179**

Amount of Each Disbursement this Period

713.52

Full Name (Last, First, Middle Initial)

**B. Logan W Murphy**

Mailing Address 169 Mayfield Drive

City State Zip Code  
Mastic Beach NY 11951

Purpose of Disbursement  
Wages

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 10 2014

**Transaction ID : D411430**

Amount of Each Disbursement this Period

713.51

Full Name (Last, First, Middle Initial)

**C. Evan S Musolino**

Mailing Address 1916 Calvert Street NW Apt 1B

City State Zip Code  
Washington DC 20009

Purpose of Disbursement  
Wages

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 10 2014

**Transaction ID : D411431**

Amount of Each Disbursement this Period

1415.71

**SUBTOTAL** of Disbursements This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

2842.74

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 173 OF 224

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. Evan S Musolino**

Mailing Address 1916 Calvert Street NW Apt 1B

City	State	Zip Code
Washington	DC	20009

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		24		2014

**Transaction ID : D412180**

Amount of Each Disbursement this Period

1415.71
---------

Full Name (Last, First, Middle Initial)

**B. Sean T O'Leary**

Mailing Address 3530 73rd Street Apt 4B

City	State	Zip Code
Jackson Heights	NY	11372

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		24		2014

**Transaction ID : D412181**

Amount of Each Disbursement this Period

1284.94
---------

Full Name (Last, First, Middle Initial)

**C. Sean T O'Leary**

Mailing Address 3530 73rd Street Apt 4B

City	State	Zip Code
Jackson Heights	NY	11372

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		10		2014

**Transaction ID : D411432**

Amount of Each Disbursement this Period

1284.92
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**SUBTOTAL** of Disbursements This Page (optional).....▶

3985.57
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**TOTAL** This Period (last page this line number only).....▶

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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. PAYCHEX**Mailing Address 1551 S. Washington Ave.,  
P.O. Box 1180City State Zip Code  
Piscataway NJ 08854Purpose of Disbursement  
Payroll Taxes/Withholdings

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State: District:Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		10		2014

**Transaction ID : D415140**

Amount of Each Disbursement this Period

1298.71
---------

Full Name (Last, First, Middle Initial)

**B. PAYCHEX**Mailing Address 1551 S. Washington Ave.,  
P.O. Box 1180City State Zip Code  
Piscataway NJ 08854Purpose of Disbursement  
Payroll Taxes/Withholdings

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State: District:Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		24		2014

**Transaction ID : D415142**

Amount of Each Disbursement this Period

1298.71
---------

Full Name (Last, First, Middle Initial)

**C. PAYCHEX**Mailing Address 1551 S. Washington Ave.,  
P.O. Box 1180City State Zip Code  
Piscataway NJ 08854Purpose of Disbursement  
Payroll Taxes/Withholdings

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State: District:Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		10		2014

**Transaction ID : D411476**

Amount of Each Disbursement this Period

53543.01
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**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

56140.43
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. PAYCHEX**Mailing Address 1551 S. Washington Ave.,  
P.O. Box 1180

City Piscataway State NJ Zip Code 08854

Purpose of Disbursement  
Payroll Taxes/Withholdings

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		24		2014

**Transaction ID : D412223**

Amount of Each Disbursement this Period

55763.51
----------

Full Name (Last, First, Middle Initial)

**B. Alexander C Peffley**

Mailing Address 14 George Street

City Fairport State NY Zip Code 14450

Purpose of Disbursement  
Wages

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		10		2014

**Transaction ID : D411433**

Amount of Each Disbursement this Period

928.51
--------

Full Name (Last, First, Middle Initial)

**C. Alexander C Peffley**

Mailing Address 14 George Street

City Fairport State NY Zip Code 14450

Purpose of Disbursement  
Wages

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		24		2014

**Transaction ID : D412182**

Amount of Each Disbursement this Period

928.51
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**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

57620.53
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. Jorge A Perez**

Mailing Address 20-30 146th Street Apt 2D

City Whitestone	State NY	Zip Code 11357
--------------------	-------------	-------------------

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		24		2014

**Transaction ID : D412183**

Amount of Each Disbursement this Period

1057.82
---------

Full Name (Last, First, Middle Initial)

**B. Jorge A Perez**

Mailing Address 20-30 146th Street Apt 2D

City Whitestone	State NY	Zip Code 11357
--------------------	-------------	-------------------

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		10		2014

**Transaction ID : D411434**

Amount of Each Disbursement this Period

1057.82
---------

Full Name (Last, First, Middle Initial)

**C. Daniel E Petrick**

Mailing Address 111 Northwood Way

City Camillus	State NY	Zip Code 13031
------------------	-------------	-------------------

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		10		2014

**Transaction ID : D411435**

Amount of Each Disbursement this Period

953.56
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**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3069.20
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. Daniel E Petrick**

Mailing Address 111 Northwood Way

City	State	Zip Code
Camillus	NY	13031

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		24		2014

**Transaction ID : D412184**

Amount of Each Disbursement this Period

953.57
--------

Full Name (Last, First, Middle Initial)

**B. John C Pistell II**

Mailing Address 2 Wilderness Path

City	State	Zip Code
Stony Brook	NY	11790

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		24		2014

**Transaction ID : D412185**

Amount of Each Disbursement this Period

713.51
--------

Full Name (Last, First, Middle Initial)

**C. John C Pistell II**

Mailing Address 2 Wilderness Path

City	State	Zip Code
Stony Brook	NY	11790

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		10		2014

**Transaction ID : D411437**

Amount of Each Disbursement this Period

713.52
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**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2380.60
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. Mark J Ptak**

Mailing Address 4152 Liberty Way

City	State	Zip Code
Elizabeth	PA	15037

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		10		2014

**Transaction ID : D411438**

Amount of Each Disbursement this Period

1066.87
---------

Full Name (Last, First, Middle Initial)

**B. Mark J Ptak**

Mailing Address 4152 Liberty Way

City	State	Zip Code
Elizabeth	PA	15037

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		24		2014

**Transaction ID : D412186**

Amount of Each Disbursement this Period

1066.86
---------

Full Name (Last, First, Middle Initial)

**C. Ryann K Quigley**

Mailing Address 87 Laurel Hill Rd

City	State	Zip Code
Northport	NY	11768

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		24		2014

**Transaction ID : D412187**

Amount of Each Disbursement this Period

1117.40
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**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3251.13
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# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 179 OF 224

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)

**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

## **A. Ryann K Quigley**

Mailing Address 87 Laurel Hill Rd

City Northport State NY Zip Code 11768

Purpose of Disbursement  
Wages

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y  
09 / 10 / 2014

**Transaction ID : D411439**

Amount of Each Disbursement this Period

1117.40

Full Name (Last, First, Middle Initial)

## **B. Nicole M Reustle**

Mailing Address 96 George Street 1R

City Brooklyn State NY Zip Code 11206

Purpose of Disbursement  
Wages

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y  
09 / 24 / 2014

**Transaction ID : D412188**

Amount of Each Disbursement this Period

517.01

Full Name (Last, First, Middle Initial)

## **C. Pablo M Romano**

Mailing Address 523 115th Street 2nd Floor

City College Point State NY Zip Code 11356

Purpose of Disbursement  
Wages

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y  
09 / 24 / 2014

**Transaction ID : D412189**

Amount of Each Disbursement this Period

1066.86

**SUBTOTAL** of Disbursements This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

2701.27

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 180 OF 224

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. Pablo M Romano**

Mailing Address 523 115th Street 2nd Floor

City	State	Zip Code
College Point	NY	11356

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		10		2014

**Transaction ID : D411440**

Amount of Each Disbursement this Period

1066.87
---------

Full Name (Last, First, Middle Initial)

**B. Joseph G Rulli**

Mailing Address 2 Robert Drive

City	State	Zip Code
Centereach	NY	11720

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		10		2014

**Transaction ID : D411441**

Amount of Each Disbursement this Period

877.98
--------

Full Name (Last, First, Middle Initial)

**C. Joseph G Rulli**

Mailing Address 2 Robert Drive

City	State	Zip Code
Centereach	NY	11720

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		24		2014

**Transaction ID : D412190**

Amount of Each Disbursement this Period

877.98
--------

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2822.83

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 181 OF 224

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. Catherine E Ryan**

Mailing Address 15 Riverside Ave

City	State	Zip Code
Mastic Beach	NY	11951

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		24		2014

**Transaction ID : D412191**

Amount of Each Disbursement this Period

713.51
--------

Full Name (Last, First, Middle Initial)

**B. Catherine E Ryan**

Mailing Address 15 Riverside Ave

City	State	Zip Code
Mastic Beach	NY	11951

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		10		2014

**Transaction ID : D411442**

Amount of Each Disbursement this Period

713.52
--------

Full Name (Last, First, Middle Initial)

**C. Natalie M Ryan**

Mailing Address 12 Cedar Drive

City	State	Zip Code
Farmingdale	NY	11735

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		10		2014

**Transaction ID : D411443**

Amount of Each Disbursement this Period

1066.87
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**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

2493.90
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 182 OF 224

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. Natalie M Ryan**

Mailing Address 12 Cedar Drive

City	State	Zip Code
Farmingdale	NY	11735

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	24	/	2014

**Transaction ID : D412192**

Amount of Each Disbursement this Period

1183.72
---------

Full Name (Last, First, Middle Initial)

**B. Tyler J Sadonis**

Mailing Address 142 Saint James St Apt 1

City	State	Zip Code
Kingston	NY	12401

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	24	/	2014

**Transaction ID : D412193**

Amount of Each Disbursement this Period

1041.59
---------

Full Name (Last, First, Middle Initial)

**C. Tyler J Sadonis**

Mailing Address 142 Saint James St Apt 1

City	State	Zip Code
Kingston	NY	12401

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	10	/	2014

**Transaction ID : D411444**

Amount of Each Disbursement this Period

1041.59
---------

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3266.90
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. Tyler J Sadonis**

Mailing Address 142 Saint James St Apt 1

City	State	Zip Code
Kingston	NY	12401

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		29		2014

**Transaction ID : D415582**

Amount of Each Disbursement this Period

1041.59
---------

Full Name (Last, First, Middle Initial)

**B. Nathaniel V Salzman**

Mailing Address 540 Clover Hills Drive

City	State	Zip Code
Rochester	NY	14618

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		10		2014

**Transaction ID : D411445**

Amount of Each Disbursement this Period

1117.42
---------

Full Name (Last, First, Middle Initial)

**C. Nathaniel V Salzman**

Mailing Address 540 Clover Hills Drive

City	State	Zip Code
Rochester	NY	14618

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		24		2014

**Transaction ID : D412194**

Amount of Each Disbursement this Period

1117.40
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**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3276.41
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# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)

**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. Abdul Y Sanderson**

Mailing Address 20417 Lundy Dr

City Carthage State NY Zip Code 13619

Purpose of Disbursement  
Wages

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 24 / 2014

**Transaction ID : D412195**

Amount of Each Disbursement this Period

1020.63

Full Name (Last, First, Middle Initial)

**B. Abdul Y Sanderson**

Mailing Address 20417 Lundy Dr

City Carthage State NY Zip Code 13619

Purpose of Disbursement  
Wages

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 10 / 2014

**Transaction ID : D411446**

Amount of Each Disbursement this Period

1233.01

Full Name (Last, First, Middle Initial)

**C. Brian J Schmid**

Mailing Address 120 Sunset Terrace

City Orchard Park State NY Zip Code 14127

Purpose of Disbursement  
Wages

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 10 / 2014

**Transaction ID : D411447**

Amount of Each Disbursement this Period

877.98

**SUBTOTAL** of Disbursements This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

3131.62

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 185 OF 224

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. Brian J Schmid**

Mailing Address 120 Sunset Terrace

City	State	Zip Code
Orchard Park	NY	14127

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	24	/	2014

**Transaction ID : D412196**

Amount of Each Disbursement this Period

877.98
--------

Full Name (Last, First, Middle Initial)

**B. Evan R Seltzer**Mailing Address 124 Raymond Ave  
Town House 164

City	State	Zip Code
Poughkeepsie	NY	12604

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	24	/	2014

**Transaction ID : D412197**

Amount of Each Disbursement this Period

877.98
--------

Full Name (Last, First, Middle Initial)

**C. Evan R Seltzer**Mailing Address 124 Raymond Ave  
Town House 164

City	State	Zip Code
Poughkeepsie	NY	12604

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	10	/	2014

**Transaction ID : D411448**

Amount of Each Disbursement this Period

877.98
--------

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2633.94
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. Benjamin G Sheridan**

Mailing Address 4 Stonebrook Ct

City	State	Zip Code
Harrington Park	NJ	07640

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		10		2014

**Transaction ID : D411449**

Amount of Each Disbursement this Period

1066.86
---------

Full Name (Last, First, Middle Initial)

**B. Benjamin G Sheridan**

Mailing Address 4 Stonebrook Ct

City	State	Zip Code
Harrington Park	NJ	07640

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		24		2014

**Transaction ID : D412198**

Amount of Each Disbursement this Period

1066.86
---------

Full Name (Last, First, Middle Initial)

**C. Lauren C Shinagawa**

Mailing Address 324 E Falls St

City	State	Zip Code
Ithaca	NY	14850

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		24		2014

**Transaction ID : D412199**

Amount of Each Disbursement this Period

928.51
--------

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3062.23

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. Lauren C Shinagawa**

Mailing Address 324 E Falls St

City	State	Zip Code
Ithaca	NY	14850

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		10		2014

**Transaction ID : D411450**

Amount of Each Disbursement this Period

928.51
--------

Full Name (Last, First, Middle Initial)

**B. David F Shor**

Mailing Address 1438 Josephine Street

City	State	Zip Code
Berkeley	CA	94703

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		10		2014

**Transaction ID : D411451**

Amount of Each Disbursement this Period

1066.86
---------

Full Name (Last, First, Middle Initial)

**C. David F Shor**

Mailing Address 1438 Josephine Street

City	State	Zip Code
Berkeley	CA	94703

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		24		2014

**Transaction ID : D412200**

Amount of Each Disbursement this Period

1066.86
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**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

3062.23
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. Kimberly A Simcoe**

Mailing Address 23 Alden Street

City	State	Zip Code
Watervliet	NY	12189

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	24	/	2014

**Transaction ID : D412201**

Amount of Each Disbursement this Period

1222.38
---------

Full Name (Last, First, Middle Initial)

**B. Kimberly A Simcoe**

Mailing Address 23 Alden Street

City	State	Zip Code
Watervliet	NY	12189

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	10	/	2014

**Transaction ID : D411452**

Amount of Each Disbursement this Period

1222.38
---------

Full Name (Last, First, Middle Initial)

**C. SKDKnickerbocker LLC**

Mailing Address 1150 18th Street NW, #800

City	State	Zip Code
Washington	DC	20036

Purpose of Disbursement  
Exempt Mail-Rice

Candidate Name

**KATHLEEN RICE**

Office Sought:	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State: NY	District: 04

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	24	/	2014

**Transaction ID : D415628**

Amount of Each Disbursement this Period

45844.08
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**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

48288.84
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. SKDKnickerbocker LLC**

Mailing Address 1150 18th Street NW, #800

City	State	Zip Code
Washington	DC	20036

Purpose of Disbursement  
Exempt Mail-Rice

Candidate Name

**KATHLEEN RICE**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: NY District: 04

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	23	/	2014

**Transaction ID : D415626**

Amount of Each Disbursement this Period

30706.18
----------

Full Name (Last, First, Middle Initial)

**B. SKDKnickerbocker LLC**

Mailing Address 1150 18th Street NW, #800

City	State	Zip Code
Washington	DC	20036

Purpose of Disbursement  
Slate Palm Card-Rice

Candidate Name

**KATHLEEN RICE**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: NY District: 04

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	30	/	2014

**Transaction ID : D415658**

Amount of Each Disbursement this Period

5165.00
---------

Full Name (Last, First, Middle Initial)

**C. SKDKnickerbocker LLC**

Mailing Address 1150 18th Street NW, #800

City	State	Zip Code
Washington	DC	20036

Purpose of Disbursement  
Exempt Mail-Rice

Candidate Name

**KATHLEEN RICE**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: NY District: 04

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	26	/	2014

**Transaction ID : D415631**

Amount of Each Disbursement this Period

29708.42
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**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

65579.60
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
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(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. Jeffrey Sloane**

Mailing Address 86-24 155 Ave

City	State	Zip Code
Queens	NY	11414

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	10	/	2014

**Transaction ID : D411453**

Amount of Each Disbursement this Period

738.57
--------

Full Name (Last, First, Middle Initial)

**B. Jeffrey Sloane**

Mailing Address 86-24 155 Ave

City	State	Zip Code
Queens	NY	11414

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	24	/	2014

**Transaction ID : D412202**

Amount of Each Disbursement this Period

738.58
--------

Full Name (Last, First, Middle Initial)

**C. Christian A Smith**

Mailing Address 9 Valley Drive

City	State	Zip Code
Yorktown Heights	NY	10598

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	24	/	2014

**Transaction ID : D412203**

Amount of Each Disbursement this Period

1218.85
---------

**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

2696.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
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(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. Christian A Smith**

Mailing Address 9 Valley Drive

City	State	Zip Code
Yorktown Heights	NY	10598

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		10		2014

**Transaction ID : D411454**

Amount of Each Disbursement this Period

1473.73
---------

Full Name (Last, First, Middle Initial)

**B. Edward D Smith**

Mailing Address 115 N Huron St

City	State	Zip Code
Ronkonkoma	NY	11779

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		10		2014

**Transaction ID : D411455**

Amount of Each Disbursement this Period

780.32
--------

Full Name (Last, First, Middle Initial)

**C. Edward D Smith**

Mailing Address 115 N Huron St

City	State	Zip Code
Ronkonkoma	NY	11779

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		24		2014

**Transaction ID : D412204**

Amount of Each Disbursement this Period

780.33
--------

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3034.38
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. Ryan P Smith**

Mailing Address 1631 Electric St

City Dunmore	State PA	Zip Code 18509
-----------------	-------------	-------------------

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		24		2014

**Transaction ID : D412205**

Amount of Each Disbursement this Period

932.45
--------

Full Name (Last, First, Middle Initial)

**B. Ryan P Smith**

Mailing Address 1631 Electric St

City Dunmore	State PA	Zip Code 18509
-----------------	-------------	-------------------

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		10		2014

**Transaction ID : D411456**

Amount of Each Disbursement this Period

932.45
--------

Full Name (Last, First, Middle Initial)

**C. Luke R Sollami**

Mailing Address 10 Starwood Lane

City Highland Mills	State NY	Zip Code 10930
------------------------	-------------	-------------------

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		10		2014

**Transaction ID : D411457**

Amount of Each Disbursement this Period

903.25
--------

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2768.15

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. Luke R Sollami**

Mailing Address 10 Starwood Lane

City	State	Zip Code
Highland Mills	NY	10930

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	24	/	2014

**Transaction ID : D412206**

Amount of Each Disbursement this Period

903.25
--------

Full Name (Last, First, Middle Initial)

**B. David R Spector**

Mailing Address 544 Hudson Ave

City	State	Zip Code
Cedarhurst	NY	11516

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	24	/	2014

**Transaction ID : D412207**

Amount of Each Disbursement this Period

713.52
--------

Full Name (Last, First, Middle Initial)

**C. David R Spector**

Mailing Address 544 Hudson Ave

City	State	Zip Code
Cedarhurst	NY	11516

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	10	/	2014

**Transaction ID : D411458**

Amount of Each Disbursement this Period

713.51
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**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

2330.28
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. Caitlin Spinelli-Moore**

Mailing Address 4500 Connecticut Ave NW #804

City	State	Zip Code
Washington	DC	20008

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	10	/	2014

**Transaction ID : D411459**

Amount of Each Disbursement this Period

1230.48
---------

Full Name (Last, First, Middle Initial)

**B. Caitlin Spinelli-Moore**

Mailing Address 4500 Connecticut Ave NW #804

City	State	Zip Code
Washington	DC	20008

Purpose of Disbursement  
Wages & Health Insurance

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	24	/	2014

**Transaction ID : D412208**

Amount of Each Disbursement this Period

1580.46
---------

Full Name (Last, First, Middle Initial)

**C. Jordan A Stawecki**

Mailing Address 63 Queens Ct

City	State	Zip Code
Newport News	VA	23606

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	10	/	2014

**Transaction ID : D411460**

Amount of Each Disbursement this Period

1092.13
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**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3903.07

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
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(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. Patrick L Stegemoeller**

Mailing Address 158 Big Toad Rd

City	State	Zip Code
Poestenkill	NY	12140

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		10		2014

**Transaction ID : D411461**

Amount of Each Disbursement this Period

877.98
--------

Full Name (Last, First, Middle Initial)

**B. Patrick L Stegemoeller**

Mailing Address 158 Big Toad Rd

City	State	Zip Code
Poestenkill	NY	12140

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		24		2014

**Transaction ID : D412209**

Amount of Each Disbursement this Period

877.98
--------

Full Name (Last, First, Middle Initial)

**C. Eric M Stone**

Mailing Address 102-45 67th Road Apt 5N

City	State	Zip Code
Forest Hills	NY	11375

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		24		2014

**Transaction ID : D412210**

Amount of Each Disbursement this Period

1031.05
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**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2787.01
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
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(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. Eric M Stone**

Mailing Address 102-45 67th Road Apt 5N

City	State	Zip Code
Forest Hills	NY	11375

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		10		2014

**Transaction ID : D411462**

Amount of Each Disbursement this Period

1031.05
---------

Full Name (Last, First, Middle Initial)

**B. Cassie R Tavernier**

Mailing Address 7221 State Route 20A

City	State	Zip Code
Perry	NY	14530

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		10		2014

**Transaction ID : D411463**

Amount of Each Disbursement this Period

867.98
--------

Full Name (Last, First, Middle Initial)

**C. Cassie R Tavernier**

Mailing Address 7221 State Route 20A

City	State	Zip Code
Perry	NY	14530

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		24		2014

**Transaction ID : D412211**

Amount of Each Disbursement this Period

867.98
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**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2767.01
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. Christopher M Tebsherany**

Mailing Address 6 Gary Ave

City	State	Zip Code
New Hartford	NY	13413

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		24		2014

**Transaction ID : D412212**

Amount of Each Disbursement this Period

928.51
--------

Full Name (Last, First, Middle Initial)

**B. Christopher M Tebsherany**

Mailing Address 6 Gary Ave

City	State	Zip Code
New Hartford	NY	13413

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		10		2014

**Transaction ID : D411464**

Amount of Each Disbursement this Period

928.51
--------

Full Name (Last, First, Middle Initial)

**C. Nicholas S Testa**

Mailing Address 157 Dari Drive

City	State	Zip Code
Holbrook	NY	11741

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		10		2014

**Transaction ID : D411465**

Amount of Each Disbursement this Period

1041.59
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**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

2898.61
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. Nicholas S Testa**

Mailing Address 157 Dari Drive

City	State	Zip Code
Holbrook	NY	11741

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		24		2014

**Transaction ID : D412213**

Amount of Each Disbursement this Period

1041.59
---------

Full Name (Last, First, Middle Initial)

**B. The Strategy Group**

Mailing Address 1603 Orrington Avenue, Suite 1730

City	State	Zip Code
Evanston	IL	60201

Purpose of Disbursement  
Exempt Mail-Robertson

Candidate Name

**MARTHA ROBERTSON**

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: NY District: 23

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		25		2014

**Transaction ID : D415629**

Amount of Each Disbursement this Period

42676.10
----------

Full Name (Last, First, Middle Initial)

**C. The Strategy Group**

Mailing Address 1603 Orrington Avenue, Suite 1730

City	State	Zip Code
Evanston	IL	60201

Purpose of Disbursement  
Exempt Mail-Robertson

Candidate Name

**MARTHA ROBERTSON**

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: NY District: 23

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		05		2014

**Transaction ID : D415593**

Amount of Each Disbursement this Period

26984.00
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**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

70701.69
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. The Strategy Group**

Mailing Address 1603 Orrington Avenue, Suite 1730

City	State	Zip Code
Evanston	IL	60201

Purpose of Disbursement  
Exempt Mail-Robertson

Candidate Name

**MARTHA ROBERTSON**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: NY District: 23

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		19		2014

**Transaction ID : D415624**

Amount of Each Disbursement this Period

42460.20
----------

Full Name (Last, First, Middle Initial)

**B. Miriam K Tohill**

Mailing Address 14 Ogden Road

City	State	Zip Code
Ithaca	NY	14850

Purpose of Disbursement  
Wages

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		24		2014

**Transaction ID : D412214**

Amount of Each Disbursement this Period

903.25
--------

Full Name (Last, First, Middle Initial)

**C. Miriam K Tohill**

Mailing Address 14 Ogden Road

City	State	Zip Code
Ithaca	NY	14850

Purpose of Disbursement  
Wages

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		10		2014

**Transaction ID : D411466**

Amount of Each Disbursement this Period

903.25
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**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

44266.70
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

New York State Democratic Committee

Full Name (Last, First, Middle Initial)

**A. Zachary T Tracey**

Mailing Address 17 Sheri Ct

City	State	Zip Code
Farmingville	NY	11738

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	10	/	2014

Transaction ID : D411467

Amount of Each Disbursement this Period

619.22
--------

Full Name (Last, First, Middle Initial)

**B. Zachary T Tracey**

Mailing Address 17 Sheri Ct

City	State	Zip Code
Farmingville	NY	11738

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	24	/	2014

Transaction ID : D412215

Amount of Each Disbursement this Period

713.51
--------

Full Name (Last, First, Middle Initial)

**C. Jon C Transue**

Mailing Address 1851 Route 296

City	State	Zip Code
Hunter	NY	12442

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	24	/	2014

Transaction ID : D412216

Amount of Each Disbursement this Period

1066.87
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SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

2399.60
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. Jon C Transue**

Mailing Address 1851 Route 296

City	State	Zip Code
Hunter	NY	12442

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		10		2014

**Transaction ID : D411468**

Amount of Each Disbursement this Period

1066.87
---------

Full Name (Last, First, Middle Initial)

**B. Ian K Vitkus**

Mailing Address 3323 Maynard Rd

City	State	Zip Code
Shaker Heights	OH	44122

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		10		2014

**Transaction ID : D411469**

Amount of Each Disbursement this Period

928.51
--------

Full Name (Last, First, Middle Initial)

**C. Ian K Vitkus**

Mailing Address 3323 Maynard Rd

City	State	Zip Code
Shaker Heights	OH	44122

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		24		2014

**Transaction ID : D412217**

Amount of Each Disbursement this Period

374.95
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**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2370.33

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. Jessica A Washington**

Mailing Address 12401 Brickyard Blvd Apt 2057

City	State	Zip Code
Beltsville	MD	20705

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		24		2014

**Transaction ID : D412218**

Amount of Each Disbursement this Period

918.51
--------

Full Name (Last, First, Middle Initial)

**B. Jessica A Washington**

Mailing Address 12401 Brickyard Blvd Apt 2057

City	State	Zip Code
Beltsville	MD	20705

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		10		2014

**Transaction ID : D411470**

Amount of Each Disbursement this Period

918.51
--------

Full Name (Last, First, Middle Initial)

**C. Kate T Werner**

Mailing Address 7307 Butternut Lane

City	State	Zip Code
Hamilton	NY	13346

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		10		2014

**Transaction ID : D411471**

Amount of Each Disbursement this Period

1281.02
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**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3118.04
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. Kate T Werner**

Mailing Address 7307 Butternut Lane

City	State	Zip Code
Hamilton	NY	13346

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		24		2014

**Transaction ID : D412219**

Amount of Each Disbursement this Period

1281.00
---------

Full Name (Last, First, Middle Initial)

**B. Brian J Whalley**

Mailing Address 335 Central Islip Blvd

City	State	Zip Code
Ronkonkoma	NY	11779

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		10		2014

**Transaction ID : D411472**

Amount of Each Disbursement this Period

427.29
--------

Full Name (Last, First, Middle Initial)

**C. Maya R Yair**

Mailing Address 3 Yorktown Rd

City	State	Zip Code
East Brunswick	NJ	08816

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		10		2014

**Transaction ID : D411473**

Amount of Each Disbursement this Period

1041.60
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**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2749.89
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. Maya R Yair**

Mailing Address 3 Yorktown Rd

City	State	Zip Code
East Brunswick	NJ	08816

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		24		2014

**Transaction ID : D412220**

Amount of Each Disbursement this Period

1041.60
---------

Full Name (Last, First, Middle Initial)

**B. Micah L Yannatos**

Mailing Address 30 Mill Hill Rd

City	State	Zip Code
Woodstock	NY	12498

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		24		2014

**Transaction ID : D412221**

Amount of Each Disbursement this Period

572.23
--------

Full Name (Last, First, Middle Initial)

**C. Micah L Yannatos**

Mailing Address 30 Mill Hill Rd

City	State	Zip Code
Woodstock	NY	12498

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		10		2014

**Transaction ID : D411474**

Amount of Each Disbursement this Period

572.24
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**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2186.07
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 205 OF 224

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. Coleman P Younger**

Mailing Address 280 Riverside Drive Apt 5A

City	State	Zip Code
New York	NY	10025

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	10	/	2014

**Transaction ID : D411475**

Amount of Each Disbursement this Period

929.53
--------

Full Name (Last, First, Middle Initial)

**B. Coleman P Younger**

Mailing Address 280 Riverside Drive Apt 5A

City	State	Zip Code
New York	NY	10025

Purpose of Disbursement  
Wages

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	24	/	2014

**Transaction ID : D412222**

Amount of Each Disbursement this Period

929.52
--------

Full Name (Last, First, Middle Initial)

**C. Russell Leibowitz**

Mailing Address 403 Mountain Ridge Drive

City	State	Zip Code
Mount Sinai	NY	11766

Purpose of Disbursement  
Expense Reimbursements-see below

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	23	/	2014

**Transaction ID : D430556**

Amount of Each Disbursement this Period

282.43
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**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2141.48
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 206 OF 224

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**New York State Democratic Committee**

Full Name (Last, First, Middle Initial)

**A. Chipotle**

Mailing Address 694 Motor Pkwy

City	State	Zip Code
Hauppauge	NY	11788

Purpose of Disbursement  
GOTV Training Food

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		23		2014

**Transaction ID : D415565**

Amount of Each Disbursement this Period

282.43
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**[MEMO ITEM]****B.**

Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Disbursement this Period

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**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Disbursement this Period

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**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

0.00
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1472117.12
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**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 207 OF 224

FOR LINE NUMBER:  
(check only one)
☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Zale Koff Graphics, Inc.

Nature of Debt (Purpose):  
Printing

Mailing Address 225 Varick Street, 4th Floor

City State

Zip Code

New York

NY

10014

Outstanding Balance Beginning This Period

24613.55

Transaction ID : D1365

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

24613.55

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) **SUBTOTALS** This Period This Page (optional)..... ►

24613.55

2) **TOTALS** This Period (last page this line number only)..... ►

24613.55

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ..... ►

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

24613.55

**SCHEDULE H3 (FEC Form 3X)**  
**TRANSFERS FROM NONFEDERAL ACCOUNTS FOR**  
**ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

PAGE 208 OF 224

FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)  
 New York State Democratic Committee

NAME OF ACCOUNT  
 NYSDC Housekeeping

DATE OF RECEIPT

M M / D D / Y Y Y Y Y  
 09 / 25 / 2014

TOTAL AMOUNT TRANSFERRED

71939.31

## BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative .....

71939.31

Transaction ID : T1481

ii) Generic Voter Drive .....

iii) Exempt Activities.....

iv) Direct Fundraising (List Activity or Event Identifier)

a) .....

b) .....

c) Total Amount Transferred For Direct Fundraising .....

v) Direct Candidate Support (List Activity or Event Identifier)

a) .....

b) .....

c) Total Amount Transferred For Direct Candidate Support.....

vi) Public Communications Referring Only to Party (Made by PAC) .....

## TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative) .....

71939.31

TOTAL This Period (Generic Voter Drive) .....

0.00

TOTAL This Period (Exempt Activities) .....

0.00

TOTAL This Period (Direct Fundraising) .....

0.00

TOTAL This Period (Direct Candidate Support) .....

0.00

TOTAL This Period (Public Communications Referring Only to Party) .....

0.00

TOTAL This Period (Total Amount Transferred).....

71939.31

**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 209 OF 224

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

**New York State Democratic Committee**

<b>A. Full Name (Last, First, Middle Initial)</b> <b>Aetna Life Insurance Company</b>		<b>Transaction ID : D414317</b>	<b>Allocated Activity or Event:</b> <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address P.O. Box 7247-0213				
City Philadelphia	State PA	Zip Code 19170-0213		
Purpose of Disbursement: Health Insurance			Allocated Activity or Event Year-To-Date 705852.62	
Activity or Event Identifier: <b>Administrative</b>		Category/ Type	Date <input type="text" value="09"/> / <input type="text" value="25"/> / <input type="text" value="2014"/>	
FEDERAL SHARE		+	NONFEDERAL SHARE	= TOTAL AMOUNT
2.67			15.13	17.80

<b>B. Full Name (Last, First, Middle Initial)</b> <b>AmTrust North America, Inc.</b>		<b>Transaction ID : D414318</b>	<b>Allocated Activity or Event:</b> <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address P.O. Box 318004				
City Cleveland	State OH	Zip Code 44131-8004		
Purpose of Disbursement: Workers Compensation			Allocated Activity or Event Year-To-Date 705852.62	
Activity or Event Identifier: Administrative		Category/ Type	Date <input type="text" value="09"/> / <input type="text" value="26"/> / <input type="text" value="2014"/>	
FEDERAL SHARE		+	NONFEDERAL SHARE	= TOTAL AMOUNT
221.85			1257.15	1479.00

<b>C. Full Name (Last, First, Middle Initial)</b> <b>Andrew Cuomo 2014, Inc.</b>		<b>Transaction ID : D414309</b>	<b>Allocated Activity or Event:</b> <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 53 North Park Avenue, Sutie 302				
City Rockville Centre	State NY	Zip Code 11570		
Purpose of Disbursement: Office Rent, Furniture Rental & Internet			Allocated Activity or Event Year-To-Date 705852.62	
Activity or Event Identifier: Administrative		Category/ Type	Date <input type="text" value="09"/> / <input type="text" value="25"/> / <input type="text" value="2014"/>	
FEDERAL SHARE		+	NONFEDERAL SHARE	= TOTAL AMOUNT
1637.67			9280.13	10917.80

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1862.19		10552.41		12414.60

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 210 OF 224

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

**New York State Democratic Committee**

<b>A. Full Name (Last, First, Middle Initial)</b> <b>BankDirect Capital Finance</b>		<b>Transaction ID : D414288</b>	<b>Allocated Activity or Event:</b> <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 660448				
City Dallas	State TX	Zip Code 75266-0448		
Purpose of Disbursement: Insurance			Allocated Activity or Event Year-To-Date 705852.62	
Activity or Event Identifier: <b>Administrative</b>		Category/ Type	Date <input type="text" value="09"/> / <input type="text" value="16"/> / <input type="text" value="2014"/>	
FEDERAL SHARE		+	NONFEDERAL SHARE	= TOTAL AMOUNT
82.80			469.17	551.97

<b>B. Full Name (Last, First, Middle Initial)</b> <b>Bully Pulpit Interactive LLC</b>		<b>Transaction ID : D414308</b>	<b>Allocated Activity or Event:</b> <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 1140 Connecticut Ave. NW, Suite 80				
City Washington	State DC	Zip Code 20036		
Purpose of Disbursement: Website Design & Development			Allocated Activity or Event Year-To-Date 705852.62	
Activity or Event Identifier: Administrative		Category/ Type	Date <input type="text" value="09"/> / <input type="text" value="25"/> / <input type="text" value="2014"/>	
FEDERAL SHARE		+	NONFEDERAL SHARE	= TOTAL AMOUNT
5850.00			33150.00	39000.00

<b>C. Full Name (Last, First, Middle Initial)</b> <b>Capital One Bank</b>		<b>Transaction ID : D414289</b>	<b>Allocated Activity or Event:</b> <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 176 Broadway				
City New York	State NY	Zip Code 10271		
Purpose of Disbursement: Bank Charge			Allocated Activity or Event Year-To-Date 705852.62	
Activity or Event Identifier: Administrative		Category/ Type	Date <input type="text" value="09"/> / <input type="text" value="23"/> / <input type="text" value="2014"/>	
FEDERAL SHARE		+	NONFEDERAL SHARE	= TOTAL AMOUNT
146.36			829.40	975.76

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
6079.16		34448.57		40527.73

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 211 OF 224

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

**New York State Democratic Committee**

<b>A. Full Name (Last, First, Middle Initial)</b> <b>De Lage Landen</b>		<b>Transaction ID : D414277</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 41602					
City Philadelphia	State PA	Zip Code 19101-1602			
Purpose of Disbursement: Equipment Lease				Allocated Activity or Event Year-To-Date 705852.62	
Activity or Event Identifier: <b>Administrative</b>		Category/ Type		Date <input type="text" value="09"/> / <input type="text" value="04"/> / <input type="text" value="2014"/>	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
36.58			207.30		243.88

<b>B. Full Name (Last, First, Middle Initial)</b> <b>Duplitron</b>		<b>Transaction ID : D414311</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 205 East 1st Avenue					
City Roselle	State NJ	Zip Code 07203			
Purpose of Disbursement: Copier Maintenance				Allocated Activity or Event Year-To-Date 705852.62	
Activity or Event Identifier: Administrative		Category/ Type		Date <input type="text" value="09"/> / <input type="text" value="25"/> / <input type="text" value="2014"/>	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
15.26			86.50		101.76

<b>C. Full Name (Last, First, Middle Initial)</b> <b>IBF Consulting, Inc.</b>		<b>Transaction ID : D414312</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 200 East 36th Street, Suite 6D					
City New York	State NY	Zip Code 10016			
Purpose of Disbursement: Computer Consulting				Allocated Activity or Event Year-To-Date 705852.62	
Activity or Event Identifier: Administrative		Category/ Type		Date <input type="text" value="09"/> / <input type="text" value="25"/> / <input type="text" value="2014"/>	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
10.88			61.62		72.50

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
62.72		355.42		418.14

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 212 OF 224

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

**New York State Democratic Committee**

<b>A. Full Name (Last, First, Middle Initial)</b> <b>Isabelle M. Parker</b>			<b>Transaction ID : D414282</b>			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 106-16 159th St.								
City Jamaica		State NY		Zip Code 11433				
Purpose of Disbursement: Wages				Category/ Type		Allocated Activity or Event Year-To-Date 705852.62		
Activity or Event Identifier: <b>Administrative</b>						Date <input type="text" value="09"/> / <input type="text" value="10"/> / <input type="text" value="2014"/>		
FEDERAL SHARE			+			NONFEDERAL SHARE		
<input type="text" value="219.92"/>						<input type="text" value="1466.13"/>		
						= TOTAL AMOUNT		

<b>B. Full Name (Last, First, Middle Initial)</b> <b>Isabelle M. Parker</b>			<b>Transaction ID : D414301</b>			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 106-16 159th St.								
City Jamaica		State NY		Zip Code 11433				
Purpose of Disbursement: Wages				Category/ Type		Allocated Activity or Event Year-To-Date 705852.62		
Activity or Event Identifier: Administrative						Date <input type="text" value="09"/> / <input type="text" value="24"/> / <input type="text" value="2014"/>		
FEDERAL SHARE			+			NONFEDERAL SHARE		
<input type="text" value="219.92"/>						<input type="text" value="1466.13"/>		
						= TOTAL AMOUNT		

<b>C. Full Name (Last, First, Middle Initial)</b> <b>Kauffmann Public Affairs, LLC</b>			<b>Transaction ID : D414310</b>			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 32-17 33rd St								
City Astoria		State NY		Zip Code 11106				
Purpose of Disbursement: Communications Consulting				Category/ Type		Allocated Activity or Event Year-To-Date 705852.62		
Activity or Event Identifier: Administrative						Date <input type="text" value="09"/> / <input type="text" value="25"/> / <input type="text" value="2014"/>		
FEDERAL SHARE			+			NONFEDERAL SHARE		
<input type="text" value="1125.00"/>						<input type="text" value="7500.00"/>		
						= TOTAL AMOUNT		

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="1564.84"/>		<input type="text" value="8867.42"/>		<input type="text" value="10432.26"/>

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT
<input type="text"/>		<input type="text"/>		<input type="text"/>

: 97 `A-G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A-N5HCB  
.

Form/Schedule: H4  
Transaction ID : D414310

Please note that payment to Kauffmann Public Affairs, LLC did not benefit any federal candidate or is not for any public communication that benefited a federal candidate.

Form/Schedule:  
Transaction ID:

**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 214 OF 224

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

**New York State Democratic Committee**

<b>A. Full Name (Last, First, Middle Initial)</b> <b>Leah J Gonzalez</b>		<b>Transaction ID : D414279</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 335 E 86th Street Apt 5C					
City New York	State NY	Zip Code 10028			
Purpose of Disbursement: Wages				Allocated Activity or Event Year-To-Date 705852.62	
Activity or Event Identifier: <b>Administrative</b>		Category/ Type		Date <input type="text" value="09"/> / <input type="text" value="10"/> / <input type="text" value="2014"/>	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
399.63			2264.55		2664.18

<b>B. Full Name (Last, First, Middle Initial)</b> <b>Leah J Gonzalez</b>		<b>Transaction ID : D414293</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 335 E 86th Street Apt 5C					
City New York	State NY	Zip Code 10028			
Purpose of Disbursement: Wages				Allocated Activity or Event Year-To-Date 705852.62	
Activity or Event Identifier: Administrative		Category/ Type		Date <input type="text" value="09"/> / <input type="text" value="24"/> / <input type="text" value="2014"/>	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
399.63			2264.55		2664.18

<b>C. Full Name (Last, First, Middle Initial)</b> <b>Leslie Ng</b>		<b>Transaction ID : D414281</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 14 Colburn Rd					
City East Brunswick	State NJ	Zip Code 08816-1103			
Purpose of Disbursement: Wages				Allocated Activity or Event Year-To-Date 705852.62	
Activity or Event Identifier: Administrative		Category/ Type		Date <input type="text" value="09"/> / <input type="text" value="10"/> / <input type="text" value="2014"/>	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
238.16			1349.59		1587.75

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1037.42		5878.69		6916.11

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

**New York State Democratic Committee**

<b>A. Full Name (Last, First, Middle Initial)</b> <b>Leslie Ng</b>		<b>Transaction ID : D414298</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address 14 Colburn Rd				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City East Brunswick	State NJ	Zip Code 08816-1103		<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: Wages		Category/ Type		Allocated Activity or Event Year-To-Date 705852.62	
Activity or Event Identifier: <b>Administrative</b>				Date <input type="text" value="09"/> / <input type="text" value="24"/> / <input type="text" value="2014"/>	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
238.16			1349.60		1587.76

<b>B. Full Name (Last, First, Middle Initial)</b> <b>NYS Child Support Processing Center (SDU)</b>		<b>Transaction ID : D414284</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address PO Box 15363				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City Albany	State NY	Zip Code 12212-5363		<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: Child Support		Category/ Type		Allocated Activity or Event Year-To-Date 705852.62	
Activity or Event Identifier: Administrative				Date <input type="text" value="09"/> / <input type="text" value="10"/> / <input type="text" value="2014"/>	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
58.15			329.54		387.69

<b>C. Full Name (Last, First, Middle Initial)</b> <b>NYS Child Support Processing Center (SDU)</b>		<b>Transaction ID : D414303</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address PO Box 15363				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City Albany	State NY	Zip Code 12212-5363		<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: Child Support		Category/ Type		Allocated Activity or Event Year-To-Date 705852.62	
Activity or Event Identifier: Administrative				Date <input type="text" value="09"/> / <input type="text" value="24"/> / <input type="text" value="2014"/>	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
58.15			329.54		387.69

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
354.46		2008.68		2363.14

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

**New York State Democratic Committee**

<b>A. Full Name (Last, First, Middle Initial)</b> <b>NYSDC Housekeeping Account</b>		<b>Transaction ID : D414286</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 176 Broadway					
City New York	State NY	Zip Code 10271			
Purpose of Disbursement: Trs of Nonfed Share of Payroll Reimbursement (See Schedule A)				Allocated Activity or Event Year-To-Date 705852.62	
Activity or Event Identifier: <b>Administrative</b>		Category/ Type		Date 09 / 10 / 2014	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
3825.00			0.00		3825.00

<b>B. Full Name (Last, First, Middle Initial)</b> <b>NYSDC Housekeeping Account</b>		<b>Transaction ID : D414304</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 176 Broadway					
City New York	State NY	Zip Code 10271			
Purpose of Disbursement: Trs of Nonfed Share of Offset (See Schedule A)				Allocated Activity or Event Year-To-Date 705852.62	
Activity or Event Identifier: Administrative		Category/ Type		Date 09 / 25 / 2014	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
4627.49			0.00		4627.49

<b>C. Full Name (Last, First, Middle Initial)</b> <b>NYSDC Housekeeping Account</b>		<b>Transaction ID : D414307</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 176 Broadway					
City New York	State NY	Zip Code 10271			
Purpose of Disbursement: Trs of Nonfed Share of Moschetta for Glen Cove's 9/24/14 VAN Receipt (See Schedule A)				Allocated Activity or Event Year-To-Date 705852.62	
Activity or Event Identifier: Administrative		Category/ Type		Date 09 / 25 / 2014	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
233.75			0.00		233.75

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
8686.24		0.00		8686.24

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

**New York State Democratic Committee**

<b>A. Full Name (Last, First, Middle Initial)</b> <b>PAYCHEX</b>		<b>Transaction ID : D415139</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 1551 S. Washington Ave., P.O. Box 1180				Allocated Activity or Event Year-To-Date 705852.62	
City Piscataway	State NJ	Zip Code 08854		Date <input type="text" value="09"/> / <input type="text" value="10"/> / <input type="text" value="2014"/>	
Purpose of Disbursement: Payroll Taxes/Withholdings		<input type="text"/>			
Activity or Event Identifier: <b>Administrative</b>		Category/ Type			
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="660.30"/>			<input type="text" value="3741.69"/>		<input type="text" value="4401.99"/>

<b>B. Full Name (Last, First, Middle Initial)</b> <b>PAYCHEX</b>		<b>Transaction ID : D416342</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 1551 S. Washington Ave., P.O. Box 1180				Allocated Activity or Event Year-To-Date 705852.62	
City Piscataway	State NJ	Zip Code 08854		Date <input type="text" value="09"/> / <input type="text" value="10"/> / <input type="text" value="2014"/>	
Purpose of Disbursement: Payroll Service		<input type="text"/>			
Activity or Event Identifier: Administrative		Category/ Type			
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="3.70"/>			<input type="text" value="20.95"/>		<input type="text" value="24.65"/>

<b>C. Full Name (Last, First, Middle Initial)</b> <b>PAYCHEX</b>		<b>Transaction ID : D415141</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 1551 S. Washington Ave., P.O. Box 1180				Allocated Activity or Event Year-To-Date 705852.62	
City Piscataway	State NJ	Zip Code 08854		Date <input type="text" value="09"/> / <input type="text" value="24"/> / <input type="text" value="2014"/>	
Purpose of Disbursement: Payroll Taxes/Withholdings		<input type="text"/>			
Activity or Event Identifier: Administrative		Category/ Type			
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="660.30"/>			<input type="text" value="3741.70"/>		<input type="text" value="4402.00"/>

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="1324.30"/>		<input type="text" value="7504.34"/>		<input type="text" value="8828.64"/>

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT
<input type="text"/>		<input type="text"/>		<input type="text"/>

**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

**New York State Democratic Committee**

<b>A. Full Name (Last, First, Middle Initial)</b> <b>Rush Computer Rentals</b>		<b>Transaction ID : D414313</b>		<b>Allocated Activity or Event:</b> <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 27315 Network Place					
City Chicago	State IL	Zip Code 60673-1273			
Purpose of Disbursement: Copier Rental				Allocated Activity or Event Year-To-Date 705852.62	
Activity or Event Identifier: <b>Administrative</b>		Category/ Type		Date 09 / 25 / 2014	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
179.64			1017.99		1197.63

<b>B. Full Name (Last, First, Middle Initial)</b> <b>Schmutter, Strull, Fleisch Inc.</b>		<b>Transaction ID : D415586</b>		<b>Allocated Activity or Event:</b> <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 80 Maiden Lane, Suite 1203					
City New York	State NY	Zip Code 10038			
Purpose of Disbursement: Insurance				Allocated Activity or Event Year-To-Date 705852.62	
Activity or Event Identifier: Administrative		Category/ Type		Date 09 / 25 / 2014	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
409.05			2317.95		2727.00

<b>C. Full Name (Last, First, Middle Initial)</b> <b>Thomas J Giordano</b>		<b>Transaction ID : D414278</b>		<b>Allocated Activity or Event:</b> <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 365 Clinton Ave Apt 4H					
City Brooklyn	State NY	Zip Code 11238			
Purpose of Disbursement: Wages				Allocated Activity or Event Year-To-Date 705852.62	
Activity or Event Identifier: Administrative		Category/ Type		Date 09 / 10 / 2014	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
237.78			1347.42		1585.20

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
826.47		4683.36		5509.83

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

**New York State Democratic Committee**

<b>A. Full Name (Last, First, Middle Initial)</b> <b>Thomas J Giordano</b>		<b>Transaction ID : D414291</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 365 Clinton Ave Apt 4H					
City Brooklyn	State NY	Zip Code 11238			
Purpose of Disbursement: Wages				Allocated Activity or Event Year-To-Date 705852.62	
Activity or Event Identifier: Administrative		Category/ Type		Date 09 / 24 / 2014	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
237.78			1347.42		1585.20

<b>B. Full Name (Last, First, Middle Initial)</b> <b>TriSource Solutions LLC</b>		<b>Transaction ID : D414276</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 5405 Utica Ridge Road, Suite 208					
City Davenport	State IA	Zip Code 52807			
Purpose of Disbursement: Credit Card Fee				Allocated Activity or Event Year-To-Date 705852.62	
Activity or Event Identifier: Administrative		Category/ Type		Date 09 / 03 / 2014	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
7.65			43.34		50.99

<b>C. Full Name (Last, First, Middle Initial)</b> <b>Verizon</b>		<b>Transaction ID : D414314</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address P.O. Box 15124					
City Albany	State NY	Zip Code 12212-5124			
Purpose of Disbursement: Telephone				Allocated Activity or Event Year-To-Date 705852.62	
Activity or Event Identifier: Administrative		Category/ Type		Date 09 / 25 / 2014	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
7.18			40.69		47.87

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
252.61		1431.45		1684.06

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

**New York State Democratic Committee**

<b>A. Full Name (Last, First, Middle Initial)</b> <b>Verizon</b>		<b>Transaction ID : D414315</b>		<b>Allocated Activity or Event:</b> <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address P.O. Box 15124					
City Albany	State NY	Zip Code 12212-5124			
Purpose of Disbursement: Fax Services				Allocated Activity or Event Year-To-Date 705852.62	
Activity or Event Identifier: <b>Administrative</b>		Category/ Type		Date 09 / 25 / 2014	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
4.33			24.53		28.86

<b>B. Full Name (Last, First, Middle Initial)</b> <b>Verizon</b>		<b>Transaction ID : D414316</b>		<b>Allocated Activity or Event:</b> <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address P.O. Box 15124					
City Albany	State NY	Zip Code 12212-5124			
Purpose of Disbursement: Telephone				Allocated Activity or Event Year-To-Date 705852.62	
Activity or Event Identifier: Administrative		Category/ Type		Date 09 / 25 / 2014	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
4.12			23.36		27.48

<b>C. Full Name (Last, First, Middle Initial)</b> <b>Willard F Younger</b>		<b>Transaction ID : D414283</b>		<b>Allocated Activity or Event:</b> <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 205 E 14th St Apt D					
City New York	State NY	Zip Code 10003			
Purpose of Disbursement: Wages				Allocated Activity or Event Year-To-Date 705852.62	
Activity or Event Identifier: Administrative		Category/ Type		Date 09 / 10 / 2014	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
108.35			613.97		722.32

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
116.80		661.86		778.66

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

**New York State Democratic Committee**

<b>A. Full Name (Last, First, Middle Initial)</b> <b>Willard F Younger</b>		<b>Transaction ID : D414302</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 205 E 14th St Apt D					
City New York	State NY	Zip Code 10003			
Purpose of Disbursement: Wages				Allocated Activity or Event Year-To-Date 705852.62	
Activity or Event Identifier: <b>Administrative</b>		Category/ Type		Date 09 / 24 / 2014	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
108.34			613.96		722.30

<b>B. Full Name (Last, First, Middle Initial)</b> <b>American Express</b>		<b>Transaction ID : D415969</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address P.O. Box 1270					
City Newark	State NJ	Zip Code 07101-1270			
Purpose of Disbursement: Credit Card Payment-see below				Allocated Activity or Event Year-To-Date 705852.62	
Activity or Event Identifier: Administrative		Category/ Type		Date 09 / 22 / 2014	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
46.02			260.80		306.82

<b>C. Full Name (Last, First, Middle Initial)</b> <b>Cadre Web Hosting</b>		<b>Transaction ID : D415972</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 243 5th Ave Ste 460					
City New York	State NY	Zip Code 10016-8703			
Purpose of Disbursement: Web Hosting				Allocated Activity or Event Year-To-Date 705852.62	
Activity or Event Identifier: Administrative		Category/ Type		Date 09 / 22 / 2014	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
4.50			25.50		30.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
154.36		874.76		1029.12

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

**New York State Democratic Committee**

<b>A. Full Name (Last, First, Middle Initial)</b> <b>eFax.com</b>		<b>Transaction ID : D415970</b>	<b>Allocated Activity or Event:</b> <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 6922 Hollywood Blvd., # 800				
City Los Angeles	State CA	Zip Code 90028-6154		
Purpose of Disbursement: Fax Services			Allocated Activity or Event Year-To-Date 705852.62	
Activity or Event Identifier: <b>Administrative</b>		Category/ Type	Date <input type="text" value="09"/> / <input type="text" value="22"/> / <input type="text" value="2014"/>	
[MEMO ITEM]				
FEDERAL SHARE		+	NONFEDERAL SHARE	
3.16			17.89	
		=	TOTAL AMOUNT	
			21.05	

<b>B. Full Name (Last, First, Middle Initial)</b> <b>Hostgator.com LLC</b>		<b>Transaction ID : D415971</b>	<b>Allocated Activity or Event:</b> <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 11251 Northwest Freeway, Suite 400				
City Houston	State TX	Zip Code 77092		
Purpose of Disbursement: Website			Allocated Activity or Event Year-To-Date 705852.62	
Activity or Event Identifier: Administrative		Category/ Type	Date <input type="text" value="09"/> / <input type="text" value="22"/> / <input type="text" value="2014"/>	
[MEMO ITEM]				
FEDERAL SHARE		+	NONFEDERAL SHARE	
7.49			42.46	
		=	TOTAL AMOUNT	
			49.95	

<b>C. Full Name (Last, First, Middle Initial)</b> <b>Intermedia.net</b>		<b>Transaction ID : D415974</b>	<b>Allocated Activity or Event:</b> <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 150 Mathilda Place, Suite 104				
City Sunnyvale	State CA	Zip Code 94086		
Purpose of Disbursement: Computer Server Hosting			Allocated Activity or Event Year-To-Date 705852.62	
Activity or Event Identifier: Administrative		Category/ Type	Date <input type="text" value="09"/> / <input type="text" value="22"/> / <input type="text" value="2014"/>	
[MEMO ITEM]				
FEDERAL SHARE		+	NONFEDERAL SHARE	
19.48			110.36	
		=	TOTAL AMOUNT	
			129.84	

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

**New York State Democratic Committee**

<b>A. Full Name (Last, First, Middle Initial)</b> <b>Network Solutions</b>		<b>Transaction ID : D415975</b>	<b>Allocated Activity or Event:</b> <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 13861 Sunrise Valley Drive, Suite 300				
City Herndon	State VA	Zip Code 20171		
Purpose of Disbursement: Domain Renewal Fee			<b>Allocated Activity or Event Year-To-Date</b> 705852.62	
Activity or Event Identifier: <b>Administrative</b> [MEMO ITEM]		Category/ Type	Date 09 / 22 / 2014	
FEDERAL SHARE		+	NONFEDERAL SHARE	= TOTAL AMOUNT
11.40			64.58	75.98

<b>B. Full Name (Last, First, Middle Initial)</b>		<b>Allocated Activity or Event:</b> <input type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address			
City	State	Zip Code	
Purpose of Disbursement:			<b>Allocated Activity or Event Year-To-Date</b>
Activity or Event Identifier:		Category/ Type	Date
FEDERAL SHARE		+	NONFEDERAL SHARE = TOTAL AMOUNT

<b>C. Full Name (Last, First, Middle Initial)</b>		<b>Allocated Activity or Event:</b> <input type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address			
City	State	Zip Code	
Purpose of Disbursement:			<b>Allocated Activity or Event Year-To-Date</b>
Activity or Event Identifier:		Category/ Type	Date
FEDERAL SHARE		+	NONFEDERAL SHARE = TOTAL AMOUNT

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
22321.57	77266.96	99588.53

**SCHEDULE L (FEC Form 3X)****AGGREGATION PAGE: LEVIN FUNDS**

Transaction ID : SchedL1

NAME OF COMMITTEE (In Full)

New York State Democratic Committee

NAME OF ACCOUNT

Levin account

	COLUMN A TOTAL THIS PERIOD	COLUMN B YEAR-TO-DATE
<b>1. RECEIPTS FROM PERSONS</b>		
(a) Itemized ..... (Use Schedule L-A)	0.00	0.00
(b) Unitemized .....	0.00	0.00
(c) Total .....	0.00	0.00
<b>2. OTHER RECEIPTS .....</b>	0.00	0.00
<b>3. TOTAL RECEIPTS .....</b> (Add Lines 1c and 2)	0.00	0.00
<b>4. TRANSFERS TO FEDERAL OR     ALLOCATION ACCOUNT</b> (Use Schedule L-B)		
(a) Voter Registration .....	0.00	0.00
(b) Voter ID .....	0.00	0.00
(c) GOTV .....	0.00	0.00
(d) Generic Campaign .....	0.00	0.00
(e) Total .....	0.00	0.00
<b>5. OTHER DISBURSEMENTS .....</b>	0.00	0.00
<b>6. TOTAL DISBURSEMENTS .....</b> (Add Lines 4e and 5)	0.00	0.00
<b>7. BEGINNING CASH ON HAND .....</b> (for Column B, use cash as of January 1st)	189.58	189.58
<b>8. RECEIPTS .....</b> (from Line 3)	0.00	0.00
<b>9. SUBTOTAL .....</b> (Add Lines 7 and 8)	189.58	189.58
<b>10. DISBURSEMENTS .....</b> (From Line 6)	0.00	0.00
<b>11. ENDING CASH ON HAND .....</b> (Subtract Line 10 From Line 9)	189.58	189.58